SCIENTECLASORIDETUR

The Health of Luton



ANNUAL REPORT ON THE HEALTH OF LUTON 1955

R. M. DYKES M.A., M.D., D.P.H.

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BOROUGH OF LUTON

PUBLIC HEALTH COMMITTEE (as at end of year 1955)

ALDERMAN E. K. HICKMAN, J.P.

Mayor

Chairman

ALDERMAN MRS. R. O. ANDREWS

COUNCILLOR MRS. B. R. CAMP

COUNCILLOR C. JEPHSON

Councillor J. Couldwell

COUNCILLOR L. G. KENRICK

Councillor S. Gonshor

Councillor Miss M. E. Redman,

M.B.E.

COUNCILLOR F. GOODYEAR COUNCILLOR S. C. HAYNE

COUNCILLOR L. W. WHITING

COUNCILLLOR D. WYNNE

BEDFORDSHIRE COUNTY COUNCIL LUTON DIVISIONAL HEALTH COMMITTEE

Chairman

ALDERMAN MRS. R. O. ANDREWS

Deputy Chairman

COUNCILLOR MISS M. E. REDMAN, M.B.E.

Representing Luton Borough Council:

Councillor J. Couldwell

COUNCILLOR L. G. KENRICK

COUNCILLOR F. GOODYEAR

COUNCILLOR D. WYNNE

Representing Bedfordshire County Council

COUNTY ALDERMAN MRS. A. URWIN COUNTY COUNCILLOR F. A. JARVIS

COUNTY ALDERMAN H. R. WALLER, COUNTY COUNCILLOR F. C. LINES

M.B.E., J.P.

COUNTY COUNCILLOR T. E. S. LLOYD

Representing Local Medical Committee:

Dr. N. M. Munro

Representing Hospital Management Committee:

Mr. K. L. Jones, o.B.E.

BOROUGH OF LUTON

STAFF

Medical Officer of Health Divisional Medical Officer

R. M. DYKES, M.A., M.D., D.P.H.

Deputy Medical Officer of Health W. EDGAR, M.B., Ch.B., D.P.H., D.C.H.

Assistant Medical Officers

G. T. Crook, M.R.C.S., L.R.C.P., D.P.H.

WINIFRED M. HISCOCK, L.R.C.P., L.R.C.S., D.P.H.

Chief Sanitary Inspector

G. F. MACEFIELD, F.S.I.A., M.R.S.I., A.M.I.San.E.

Deputy Chief Sanitary Inspector

R. LORD, M.S.I.A., M.R.S.I., A.M.I.San.E.

Specialist Inspectors

Food Hygiene

Housing

P. A. Freestone, M.S.I.A. M. G. WINTRINGHAM, D.P.A., M.S.I.A.

District Sanitary Inspectors (5)

All Sanitary Inspectors hold the Certificate of the R.S.I. and S.I.J.E.B., and the Certificate of the Royal Sanitary Institute for Meat and Other Foods Inspector. Additional qualifications include R.S.I. Certificate for Smoke Inspector, R.S.I. Certificate in Sanitary Science as applied to Buildings and Public Works, and the Certificate of Associateship of the Institution of Sanitary Engineers.

LUTON DIVISIONAL HEALTH COMMITTEE

STAFF

Senior Administrative Officer H. Towle

Superintendent Health Visitor

MRS. A. E. LANGFORD, S.R.N., S.C.M., Cert.H.V.

Health Visitors (8)

State Registered Nurses (7)

Day Nursery Matrons

MRS. J. M. GREEN, S.R.N. MISS D. HAFFIELD, S.R.N. MISS D. HOBBS, S.R.N.

Midwifery and Nursing Services Supervised by Deputy County Nursing Officer

Domiciliary Midwives (8)

District Nurses (12)

Home Help Officer
MISS E. A. PARSONS

Chief Clerk

J. W. A. LINDLEY

Public Health Department,
63–69 Guildford Street,
LUTON.
February, 1956.

His Worship the Mayor, Aldermen and Councillors of the Borough of Luton.

Ladies and Gentlemen,

It is the function of an Annual Report to present as concisely as possible the changes that are taking place in community health and, at the same time, to review the health services that are being provided. Since concise presentation can only be achieved by statistical tables and graphs the report, from the lay reader's point of view, frequently tends to become dull. Accordingly, it is customary when presenting the report to draw attention to points of special interest contained in it.

This year a greater degree of emphasis has been given to the subject of respiratory tuberculosis. First, there is an analysis of the work done by the Mass Miniature Radiography Unit which visited the town during the early part of 1955. Here it will be seen that nearly one out of every three persons aged 15 years and over, attended for x-ray examination; but in the age group 15–24 years the proportion was even higher—one out of every two. In all more than 28,000 persons were x-rayed, but of this number only 28 who had not previously been notified were found to have active respiratory tuberculosis i.e. approximately one in every thousand. From this it would appear that the pool of unknown cases in the town is small.

Next, we have an excellent contribution by Dr. Brian Shaw, Physician to the Chest Clinic. Dr. Shaw's report relates to Luton and South Bedfordshire, and draws attention to the marked improvement in the tuberculosis death rate in recent years. He expresses anxiety at the continuing high notification rate which, in contrast with the Mass Miniature Radiography findings, indicates that the reservoir of unknown tuberculosis in the area may still be considerable.

Finally, in the Report on the School Health Service, Dr. W. Edgar reviews the measures that are adopted to lessen the risk from tuberculosis in school children and describes how, on the assumption that there is a latent reservoir of infection he undertook, as part of the first periodic school medical inspection, the tuberculin testing of school entrants. The response to the test was less than expected, permission being given for the test to be done in only 71.6% of the children examined, but it was disconcerting to find that a follow-up of the contacts of tuberculin-positive children failed to reveal a single case of active tuberculosis not hitherto known to the Chest Clinic. Because the acceptance rate was disappointing Dr. Edgar is reluctant to draw firm conclusions, but is of the opinion that the ascertainment of cases of active tuberculosis in the town is probably high.

The population of Luton is increasing steadily year by year and new families coming into the town add to the complexity of the problem of tuberculosis, but the co-ordinated approach by medical officers of different branches of the Health Service, is reassuring.

In the Appendix to the Report, Dr. G. T. Crook describes an enquiry which he made into an outbreak of Infective Hepatitis. The enquiry was restricted to the Farley Hill Estate, but it would appear that the incidence of this illness throughout the town was much higher than the number of notified cases would suggest. This immediately raises the question whether the incidence in the country as a whole might not be much higher than is generally believed.

The Appendix also contains a note on the incidence of poliomyelitis in Luton from 1947 to 1955 which demonstrates once again, if demonstration were necessary, that mortality rates do not necessarily reflect morbidity rates. And the reader will no doubt ask himself whether, in view of the proposed vaccination scheme which is shortly to be introduced, we should not be making more intensive enquiries into our present state of immunity towards the disease.

In the late months of 1954 vaccination against whooping cough was introduced and the response during 1955 was gratifying. The number of notified cases of whooping cough in 1955 was 119, as compared with 424 in 1954, but it would be premature to say that this reduction was attributable to the vaccination scheme. Indeed, looking back we find that the number of cases in 1953 was only 74. The success of an immunisation or vaccination scheme is never immediately apparent. Individual protection may be achieved, but some years must elapse before any marked change is likely to take place in the epidemiological pattern of the disease in the community.

Although the report contains much more that is worthy of comment I wish, in conclusion, only to draw attention to the infant mortality rate. In recent years, the Luton rate has tended to be higher than the national figure, but the provisional rate of 14.9 per 1,000 live births in 1955 is the lowest that has yet been achieved in Luton and compares very favourably with the provisional figure of 24.9 for England and Wales. The lowest figure previously recorded in Luton was 22 per 1,000 in 1950.

I wish to express my thanks to the Staff of the department for their continued loyalty and devotion to service. I wish also to thank the chairman and Members of the Health Committee for their patience and understanding.

I have the honour to be,

Your obedient servant,

R. M. DYKES,

Medical Officer of Health.



STATISTICS and SOCIAL CONDITIONS OF THE AREA

GENERAL STATISTICS

Area (from 1st April, 1939	9)	• • •		8,773	acres
Population (Census, 1951)				110,381	
Registrar-General's Estim		`	ovisional	-	•
Number of inhabited hou	ses, 1st April	l, 1955	• • •	32,930	
Rateable value (1st April,	1955) unred	uced	• • •	£1,005,668	
Rateable value (1st April,	1955) reduce	ed	• • •	£864,298	
Sum represented by Penn	y Rate	• • •	• • •	£3,535	
EXTRACTS FROM V	TTAL STA	TISTI	CS FOI	R THE YEAR	R 1955
			Males	Females	Total
Notified live births	Legitimate	• • •	1,077	1,014	2,091
	Illegitimate	• • •	42	57	99
	All	• • •	1,119	1,071	2,190
Notified stillbirths	Legitimate		24	28	52
	Illegitimate	• • •	3	_	3
	All		27	28	55
Total Live and Stillbirths		• • •	1,146	1,097	2,243
Registered live births*	Legitimate	• • •	778	760	1,538
0	Illegitimate	• • •	31	40	71
	All	• • •	809	800	1,609
Live Birth Rate per 1,000 of	of estimated r	esident	populati	on (provisional)	14.1
Registered stillbirths* .	• • • • •	• • •	18	16	34
Stillbirth Rate per 1,000 t	otal (live and	l still) b			20.7
D ' 1D 1 +				Females	Total
Registered Deaths* .		4	583	511	1,094
Death rate per 1,000 estin		it popu	iation (pr	·	9.6
Deaths from Puerperal Ca	auses:—		Deaths	Rate per 1,000 registered total	
		•	Deains	births	
Puerperal Sepsis	• • •	• • •	Nil	Nil	
Other Puerperal	causes	• • •	3	1.8	
Total .	•••	• • •	3	1.8	
Death Rates of Infants ur	nder 1 vear o	fage:	-		
All Infants per 1	•			rovisional)	14.9
Neo-natal all inf			1.0	•	10.7
	\ <u>*</u>	•			15.5
Legitimate per 1			-	·	
Illegitimate per	•			**	Nil
Correc	ted for inward	and ou	tward trai	191012	

BIRTH RATES, DEATH RATES, ANALYSIS OF MORTALITY, MATERNAL DEATH RATES AND CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1955

11 TABLE 1

BIRTH RATES, DEATH RATES, ANALYSIS OF MORTALITY, MATERNAL DEATH RATES AND CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1955.

(England and Wales)

(Provi	sional f				l Wales ekly an		rterly Return	s)
							LUTON	ENGLAND AND WALES
Births:							Rates per 1, Popu	
Live Still	•••	•••	• • •	•••	• • •	• • •	13·8 { 0·29 20·8 (a)	$ \begin{cases} 15.0 \\ 0.35 \\ 23.1 (a) \end{cases} $
Deaths: All causes Typhoid and P	 aratyph	oid Fev	 vers	• • •	• • •	• • •	10.7	11.7
Whooping Cou Diphtheria Tuberculosis	• • •	• • •	• • •	• • •	•••	• • •	0.08	0·00 0·00 0·15
Influenza Smallpox Acute Poliomye	• • •	• • •	 Polic	 enceph	 nalitis)	• • •	0·03 — 0·01	0·07 — 0·01
Pneumonia Notifications:	• • •	•••	• • •	•••	•••	• • •	0.40	0.51
Typhoid Fever Paratyphoid Fe Meningococcal	ver	• • •	• • •	• • •	• • •	• • •	0.02	0·00 0·02 0·03
Whooping Coup Diphtheria	• • •		• • •	• • •	• • •	• • •	0·52 1·04 —	0·73 1·78 0·00
Erysipelas Smallpox Measles	• • •			• • •		• • •	0·03 — 10·00	0·10 — 15·61
Acute Poliomye Acute Poliomye	litis, Pa litis, N	on-Para	 lytic	• • •	• • •	• • •	0·18 0·07 0·02	0·63 0·08 0·06
Food Poisoning	• • •	• • •	e • •		• • •	• • •	0.08 Rates per 1,0	0.28 00 live births
Deaths under 1 y Deaths from Dian	rear of a	age and Ent	 eritis ı	 under 2	years o	 f age	15·6 1·2	24·9† 0·8
(a) Notification	15						Rates per 1 Births (live	
Puerperal Py (b) Maternal M	rexia		• • •	•••		• • •	15.32	17.79
Sepsis of Pre Other Toxae Abortion wit	gnancy, mias of	Childb Pregna	ncv			• • •	0.6)
Abortion wit Abortion wit Other Comp	h Sepsi hout Se	s epsis	• • •	• • •	0 4 0		0.6	}0.10
Puerperium		•••	gnan		···	and		0.54

A dash (—) signifies that there were no deaths or notifications. †Per 1,000 related births. (a) Per 1,000 Total (Live and Still) Births.

COMPARATIVE STATISTICS FOR 1946-1955

HS OCompara- billity factor 1:13 1:12 1:12 1:12 1:12 1:13	1	1 1 Y 14		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 101	3 44		-P/25	D	1008-1 A 13	k	Visit II	F1 - 91
Estinated Popular Number Popular (1909) 105,220 2,096 1,990 1,007 1		ATHS	Rate per 1,000 total births	1.4	0.42	1.03	0.5	9.0		1.2	9.0	1	1.8
Estinated Popular Number Popular (1909) 105,220 2,096 1,990 1,007 1		AL DE		3	1	2	1	1		2	1		3
Estinated Popular Number Popular (1909) 105,220 2,096 1,990 1,007 1		ATERN	Number Other	1		2	1	1		2	1	1	3
Esti-nated Number Per 1,000 Comparation Figure tion Per 1,000 Per 1,000 Number tion Number tio		7W	Sepsis	2	1		1				1		
Esti-nated Number Per 1,000 Comparation Figure tion Per 1,000 Per 1,000 Number tion Number tio		S	Rate per 1,000 live births	34	37	28	26	22	33	26	28	31	14.9
Esti- nated tion Rate Popula- tion Rate Popula- tion Number Losti- tion Rate per 1,000 bility bility Number bility bility Rate popula- tion Number Popula- tion Rate per 1,000 births Number per 1,000 births Rate popula- tion Rate popula- tion Number popula- tion Rate popula- tion Rate popula- tion Number popula- tion Rate popula- tion Number popula- tion Rate popula- tion Number popula- tion Rate popula- tion Popula- tion Popula- tion Popula- popula- tion Popula- tion Popula- tion <td>600</td> <td>DEATH</td> <td>TOTAL</td> <td>71</td> <td>85</td> <td>54</td> <td>48</td> <td>38</td> <td>57</td> <td>43</td> <td>47</td> <td>49</td> <td>25</td>	600	DEATH	TOTAL	71	85	54	48	38	57	43	47	49	25
Esti- nated tion Rate Popula- tion Rate Popula- tion Number Losti- tion Rate per 1,000 bility bility Number bility bility Rate popula- tion Number Popula- tion Rate per 1,000 births Number per 1,000 births Rate popula- tion Rate popula- tion Number popula- tion Rate popula- tion Rate popula- tion Number popula- tion Rate popula- tion Number popula- tion Rate popula- tion Number popula- tion Rate popula- tion Popula- tion Popula- tion Popula- popula- tion Popula- tion Popula- tion <td>-</td> <td>NFANT</td> <td>4 weeks —12 months</td> <td>20</td> <td>38</td> <td>27</td> <td>16</td> <td>17</td> <td>16</td> <td>14</td> <td>17 .</td> <td>14</td> <td>2</td>	-	NFANT	4 weeks —12 months	20	38	27	16	17	16	14	17 .	14	2
Esti-nated tion Rate Population Comparated factor Rate Live Stitute Stitute Stitute Live Stitute Stitute Live Live Live Live Live Live Live Liv		1	Under 4 weeks	51	47	27	32	21	41	29	30	35	18
Esti-nated tion Rate Population Comparated factor Rate Live Stitute Stitute Stitute Live Stitute Stitute Live Live Live Live Live Live Live Liv					88.F8	1.13	1.13	1.13	1.12	1.12	1.12	1.13	
Esti- mated Popula- tion 105,220 2,096 19.9 108,400 1,902 110,210 110,500 1,653 111,200 1,653 111,200 1,609		DEATHS	Rate per 1,000 esti- mated Popula-	9.6	9.5	9.1	2.6	9.6	8.6	9.4	9.2	9.1	9.6
Esti- mated Popula- tion 105,220 2,096 19.9 108,400 1,902 110,210 110,500 1,653 111,200 1,653 111,200 1,609			Number	1,019	1,036	686	1,064	1,056	1,075	1,044	1,032	1,033	1,094
Esti- mated Popula- tion 105,220 2,096 19.9 108,400 1,902 110,210 110,500 1,653 111,200 1,653 111,200 1,609		BIRTHS	Rate per 1,000 total births	32.8	21.2	20.6	26.2	28.5	25.3	21.8	27.1	24.8	20.7
Esti- mated Popula- tion 105,220 2,096 19·9 108,250 2,303 21·3 108,400 1,902 17·5 109,240 1,821 16·7 110,210 1,706 15·8 110,500 1,653 14·9 111,200 1,653 14·9 111,200 1,659 13·9 113,800 1,609 14·1		STILLI		71	50	40	49	50	45	37	46	40	34
Esti- mated Popula- tion 105,220 2,096 108,400 1,902 109,240 1,821 110,210 1,706 110,500 1,653 111,200 1,653 111,200 1,653		HS					0.95	0.95	0.95	0.95	0.95	66.0	
Esti- mated Popula- tion 105,220 2,096 108,400 1,902 109,240 1,821 110,210 1,706 110,500 1,653 111,200 1,653 111,200 1,653		VE BIRT	Rate per 1,000 esti- mated Popula- tion	19.9	21.3	17.5	16.7	15.5	15.8	14.9	14.8	13.9	14.1
		LI		2,096	2,303	1,902	1,821	1,706	1,727	1,653	1,651	1,569	1,609
Year 1946 1947 1950 1951 1953 1954 1955			Esti- mated Popula- tion	105,220	108,250	108,400	109,240	110,210	109,600	110,500	111,200	112,500	113,800
			Year	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955

STILLBIRTHS AND NEO-NATAL DEATHS	ATAL DEATHS	1946	1947	1948	1949	1950	1921	1952	1953	1954	1955
Rate per 1,000	England and Wales	27.2	24.1	23.2	22.7	22.7	23.0	22.7	22.4	23.5	23.1
Sillebikins total oituis	Luton	32.8	21.2	20.6	26.2	28.5	25.3	21.8	27.1	24.8	20.9
NEO MATAT DEATHE live high	England and Wales	24.8	22.7	19.7	19.3	18.5	18.8	18·3	17.7	17.7	1
	Luton	24.3	20.4	14.2	17.5	12.3	23.7	17.5	18.6	22-3	10.7

DISTRIBUTION OF NOTIFIED LIVE BIRTHS AS BETWEEN INSTITUTIONAL AND DOMICILIARY CONFINEMENT

(Corrected for Inward and Outward Transfers)

	Ins	stitutional			Domi	ciliary	e de aporte de la Carte de la	Crond
Year	Maternity Hospital Units	Private Nursing Homes	Total	District Mid- wives	Private Mid- wives	Doctors and Parents	Total	Grand Total
1950 1951 1952 1953 1954 1955	923 927 844 852 832 843	155 129 170 166 156 177	1,078 1,056 1,014 1,018 988 1,020	612 652 634 585 567 584		16 19 — 6 5 5	628 671 635 591 572 589	1,706 1,727 1,649 1,609 1,560 1,609

DISTRIBUTION OF NOTIFIED STILLBIRTHS AS BETWEEN INSTITUTIONAL AND DOMICILIARY CONFINEMENT

(Corrected for Inward and Outward Transfers)

Cause	Mate Hosy Un	pital Nur	sing Domi	1	Grand Total
Maternal Toxaemia Foetal malformation Prematurity Complications of labour . Accidental haemorrhage . Other		8 - 2 - 3 - 4	1	1 1 2	8 4 - 4 9 1 8
Total	. 20	б	4	4	34

OPHTHALMIA NEONATORUM

(i) Total number of cases notified during the year	Nil
(ii) Number of cases in which:— (a) Vision lost (b) Vision impaired (c) Treatment continuing at end of year	Nil Nil Nil

DEATHS OF LUTON RESIDENTS DURING THE YEAR 1955

75+		
65-74		
55-64	4 4	
45-54	ω	
35-44	8	
25–34		
15-24		
10–14		
5-9		
1-4		
Total under 1 year		
1 month to 1 year		
Under 4 weeks		
All	5	
CAUSE OF DEATH	1. Tuberculosis of Respiratory System 2. Tuberculosis—Other forms 3. Syphilis 4. Typhoid Fever 5. Cholera 6. Dysentery 7. Scarlet Fever and Strep. Sore-throat 9. Whooping Cough 10. Meningococcal Infections 11. Plague 12. Acute Poliomyelitis 13. Smallpox 14. Measles 15. Typhus and Rickettsial Disease 16. Malaria Carried forward	

75+ 10-14 | 15-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 ~ DEATHS OF LUTON RESIDENTS DURING THE YEAR 1955 (continued) 5-9 1-4 month under 1 year Total ~ to 1 year Under weeks Ages 5 2 2 172 : CAUSE OF DEATH Brought forward Carried forward 17. 17. 18. 18. 19. 19. 25. 23. 25. 25. 25. 28. 29. 330. 331. 332.

DEATHS OF LUTON RESIDENTS DURING THE YEAR 1955 (continued)

75+	369 3 3 3 3 3 3 3 3 3	405
65–74	296	322
55-64	154	165
45-54	96 1	117
35-44	24 1 27 27	33
25-34	m	10
15-24	0 - - 00	∞
10-14		2
5-9	2	3
1-4		4
Total under 1 year		25
nonth to 1	τυ 2	7
Under 4 weeks	2	18
All	954 1 1 2 3 6 6 6 111 112 112	1,094
CAUSE OF DEATH	Brought forward 34. Appendicitis	Total

DEATHS OF LUTON INFANTS UNDER 1 YEAR OF AGE DURING 1955

All			(r	-	7	3	5	00	25
11 to 12 m'ths		1			П				1
10 m'ths	l	1		1	1	١	1	١	1
9 m'ths		1			1		ŀ	1	l
8 m'ths	1			1	1		1		1
7 m'ths		1			1	1	1		I
6 m'ths		-	<u> </u>			1		1	2
5 m'ths	l				1	1			
2 3 4 5 6 7 8 9 10 m'ths m'ths m'ths m'ths m'ths m'ths m'ths									
3 m'ths									
2 m'ths	l	-							
28 days to 2 m'ths	1		0		-			-	<i>c</i> 0
21 to 28 days									-
14 days]	l							1
7 days						-			
6 days	1	1			1	-			-
days days days days days					1	1			
4 days		1			1				
3 days	-				1	1		3	4
2 days	1				1		23		
1 day		1		1	1			-	-
under 1 day	ľ	1	-	1		1	7	4	7
Cause of Death	Meningococcal Infections	and Haem. Tissues	Congest, ricart Disease Pneumonia	Ent.	ea 1 Malfor	tions	Atelectasis	Diseases	Total

NOTIFIED INFECTIOUS DISEASES, 1955, Civilian (Corrected in cases of revised diagnosis)

No. of Concession, Name of Street, or other Designation, Name of Street, Name		
TOTAL	60 119 1,138 21 8 3 111 25 3 4 4 41	1,443
Over 65		9
45-65	10	16
35-44		6
25-34		26
20-24	- -	10
15–19	1 2 1 2 1	6
10–14		22
5-9	33 40 592 1 1 2 2 1	269
4	8 22 151 151 —	182
3	5 17 158 1 1 1 1	184
2	4 14 123 2 1 1 1	145
1	2 10 85 	101
Under 1 year	15 21 — —	36
	Scarlet Fever Whooping Cough Measles Preumonia Acute Poliomyelitis (Paralytic) Acute Poliomyelitis (non-Paralytic) Dysentery Puerperal Pyrexia Meningococcal Infection Erysipelas Jaundice Food Poisoning	ALL

TUBERCULOSIS

There were 116 cases of pulmonary tuberculosis notified for the first time during the year, giving a notification rate of 1.02 per thousand of the population. The number shows an increase of 6 cases as compared with 1954, when the notification rate was .97 per thousand of the population. Nevertheless the figures may be regarded as satisfactory having regard to the fact that the Mass Radiography Unit visited the town during the early part of 1955. An analysis of the population X-Rayed is set out later in the Report but at this stage it is of interest to note that only 28 cases of pulmonary tuberculosis were discovered as a direct result of Mass Radiography. This compares with 60 in 1952 when the Unit was last in Luton.

The number of deaths from pulmonary tuberculosis was 10, representing a mortality rate of .08 per thousand of the population and is the same as recorded last year. From the table which sets out the age structure of notifications and deaths it will be seen that no person under the age of 35 years died from the disease during 1955. Furthermore no person under 25 years of age has died from respiratory tuberculosis since 1952.

PARTICULARS OF NEW CASES OF TUBERCULOSIS AND ALL DEATHS FROM THE DISEASE DURING 1955

	0 . 0 . 7	New	Cases	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Deaths			
Age Periods	Pulmonary M. F.		Non- Pulmonary M. F.		Pulm M.	onary F.	No Pulm M.	
Under 1 year	1				_			
1 year	5	2	—				<u> </u>	
5 ,,	2	2		3	_ `			
10 ,,	5	1	_	_				_
15 ,,	8	10	2	2			_	
20 ,, 25 ,,	4	6			_	_		
25 ,,	13	3		2 3	_	_	_	- 4
35 ,,	17	1	1	3	1	1	_	
45 ,, 55 ,,	12	7	1	1	2	1		_
55 ,,	13	1	1	1	3	1		-
65+	2	1	_	_	1			_
Totals	82	34	5	12	7	3	- 7/3	_

The following table shows the number of cases of tuberculosis notified in Luton during each of the last five years together with the number of deaths:—

			Noti	ified	Deaths			
	Year		Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary		
1951	• • •		114	26	23	5		
1952	•••	• • •	164	17	14	3		
1953	•••	• • •	144	18	21	4		
1954	• • •	• • •	110	16	10	1		
1955	•••	•••	116	17	10	_		

The following table shows the number of cases on the register at the 31st December, 1955, together with the numbers added to the register and those removed during the year.

Puln	nonary	Non-P	ulmonary
Male	Female	Male	Female
597	449	28	70
76	40	5	12
18	19		1
2	7	-	
693	515	33	83
45	27	6	7
23	13	2	
7	3	organization)	
3		-	
	1		
6	1	1	1
609	470	24	75
	Male 597 76 18 2 693 45 23 7 3 6	Male Female 597 449 76 40 18 19 2 7 693 515 45 27 23 13 7 3 3 - - 1 6 1	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$

MASS RADIOGRAPHY

The Mass Radiography Unit from the North-West Metropolitan Regional Hospital Board visited Luton during the early part of 1955. It was the Unit's third visit to Luton since the inception of the National Health Service in 1948, the previous visits being in 1950 and 1952.

On this occasion, however, in addition to visiting the larger industrial concerns, the Unit also provided a service for the general public at six other centres in the town before being finally located centrally at the British Red Cross Headquarters in Williamson Street.

The six centres visited were:—

Whipperley Ring, Farley Hill.

British Legion Hall, Marsh Road.

St. Christopher's Church Hall, Round Green.

St. Margaret's Methodist Church, Biscot Mill

Methodist Church Hall, High Town.

St. Paul's Church Hall, New Town Street.

Facilities were extended to include all school children in their last year at school. A total of 28,223 of the town's population, including 1,617.

school children, were X-Rayed, representing 32.6 per cent of the population of 15 years and over. The number is an increase of 3,498 over the 1952 figure of 24,725.

The following table shows by age and sex the total number X-Rayed.

Ago Crovo		Estimate Population			o. X-Ra	yed	% of Population		
Age Group	M.	F.	ALL	M.	F.	ALL	M.	F.	ALL
15-24 years	6,080	7,000	13,080	3,307	4,062	7,369	54.3	58.0	57.0
25–34 ,,	8,220	7,300	15,520	4,629	2,417	7,046	56.3	33.1	45.3
35–44 ,,	10,350	9,520	19,870	4,389	1,929	6,318	42.4	20.2	31.8
45-54 ,,	8,625	8,825	17,450	3,669	1,476	5,145	42.6	16.7	28.8
56-60+ years	8,825	11,940	20,765	1,700	645	2,345	19.3	5.4	11.3
ALL	42,100	44,585	86,685	17,694	10,529	28,223	42.0	23.6	32.6

The table on the following page shows the distribution by occupation of those who were X-Rayed.

Two hundred and twenty three persons resident in Luton were referred by the Mass Radiography Unit to the Chest Clinic for further examination. Of this number, 28 were later notified as suffering from active pulmonary tuberculosis. This figure represents ·09 per cent of the total number who attended for mass radiography as compared with ·24 per cent in 1952 when after mass radiography 60 persons were diagnosed as suffering from the disease.

Ago Group	No. of Luton Persons Referred				rcentage ber exa		Notified Cases		
Age Group	M.	F.	ALL	M.	F.	ALL	M.	F.	ALL
15-24 years	16	10	26	·48	·24	·35	2	3	5
25–34 ,,	38	6	44	⋅82	·24	.62	3	1	4
35–44 ,,	44	13	57	1.00	.67	∙92	5	_	5
45-54 ,,	52	6.	58	1.41	·40	1.10	9	2	11
55-60+ years	35	3	38	2.05	· 4 6	1.19	3	**ng@houst@	3
ALL	185	38	223	1.04	·36	·79	22	6	28

DISTRIBUTION BY AGE, SEX AND OCCUPATION OF RESIDENTS ATTENDING MASS RADIOGRAPHY 1955

	AL	F.	4,062	2,417	1,929	1,476	645	10,529	23	38	9
	TOTAL	M.	3,307	4,629	4,389	3,669	1,700	17,694	28,223	185	22
	House- wife	F.	158	855	989	473	366	2,538	2,538	17	3
		正.	454	130	1117	101	33	835	7(ı	1
	Misc.	Ä.	154	202	173	168	175	872	1,707	10	1
	School	규.	919			1	1	919	[7	7	1
	Sch	Ä.	869	ı	ı	1	-	869	1,617	8	1
	Chem. 7orkers	표.	14	3	-	П		19	8	I	
	Chem. Workers	M.	64	120	06	82	43	399	418	5	1
	od	표.	48	89	174	166	59	515	6	_	1
	Food	M.	23	51	45	45	40	204	719	5	1
,	Hat orkers	F.	196	20	135	123	58	582	5	3	2
	Hat Workers	M.	30	29	58	99	20	223	805	7	1
-	Dist. Trades	됴	130	29	75	42	16	330		7	
	Dist. Trades	Σ.	31	78	31	27	4	121	451	H	
	Building and Allied Trades	ഥ		1	1	1	1		4	1	1
	Building and Allied Trades	Ä.	106	63	52	09	43	324	324	∞	-
,	cht eering	н	485	413	392	352	71	1,713	132	∞	1
	Light Engineering	M.	1,767	3,422	3,356	2,784	1,090	12,419	14,132	131	15
	Clerical Workers	표.	1,604	741	300	181	36	2,862	36	5	1
	Cle	M.	386	599	436	355	198	1,974	4,836	17	1
	Mana- gerial	压.		1	7	7	7	11	210	I	1
	Mage	M.	4	28	63	9	39	199	2	-	1
	o- onal	표.	54	70	47	30	4	205	466	I	1
	Pro- fessional	Ĭ.	44	87	85	27	18	261	4	2	2
	Age Group		15-24 years	25–34 ,,	35–44 ,,	45–54 ,,	55-60 years	TOTALS	TOTAL	No. referred for further examination	No. finally notified

REPORT OF THE CHEST PHYSICIAN

I am indebted to Dr. J. Brian Shaw, Physician at the Luton Chest Clinic for the following report. It should be noted, however, that the Luton Chest Clinic undertakes the treatment of cases from a large part of South Bedfordshire as well as from the Borough of Luton. The statistics in the report include patients living outside the Borough.

"The Chest Clinic and attached wards are staffed and administered by the Hospital Management Committee with nurses, technical and clerical staff, including radiographers, physiotherapists and occupational therapists. Tuberculosis Health Visitors, who are particularly concerned with prevention, and a Welfare Officer responsible for after care, are on the staff of the Local Health Authority, but in practice work from the Chest Clinic under the direction of the Chest Physician. Tuberculosis is peculiar, therefore, in that diagnosis and treatment are the responsibility of the Hospital Management Committee, prevention and after care are the responsibility of the Local Authority. In the report for 1952 mention was made of this artificial division of responsibility, and it was then said that in spite of this the tuberculosis service worked well due to the common sense and good will of both parties. These qualities have become so long practised now that the division has ceased to be obvious, and for the most part remains invisible in the Chest Clinic.

The majority of patients attending the Luton Clinic, like most other Chest Clinics, are referred for chest diseases other than tuberculosis. The Chest Clinic, however, remains the centre for diagnosis, treatment and prevention of tuberculosis in this area and this report refers mainly to this

disease.

Luton Chest Clinic

The accommodation in the lower floor of what was formerly the Old Bute Hospital provided ample accommodation for the numbers of patients attending prior to the National Health Service Act. In 1947 there were some 3,500 patients attending annually; the present yearly attendance figure is over 28,000. The accommodation is inadequate for these numbers, and plans for altering or rehousing the Clinic have been under discussion for some years

Morbidity

(i) Tuberculosis Register

With the exception of the year 1950, when the register was revised, the number of patients with notified tuberculosis has steadily risen. This is due to a number of causes, e.g. better ascertainment, the fact that fewer patients die and that sufficient time has not yet elapsed to see the effect on the cases that have been treated. It is not customary to strike a patient off the register until the disease has been arrested for five years. Treatment with modern chemotherapy started about 1950 and has been steadily improving.

Number of Cases on the Tuberculosis Register of Luton Chest Clinic on 31st December.

1949	1950	1951	1952	1953	1954	1955
1,404	1,131	1,263	1,433	1,528	1,656	1,758

(ii) New Cases Diagnosed

The persistently high figure of new patients with tuberculosis is disappointing, particularly as recently even stricter criteria have been used for notification. The figure indicates that the reservoir of unknown tuberculosis in the area must be still considerable. It will be noted that there is a higher rate of new cases following the visits of the Mass Radiography Unit.

Number of New Patients Diagnosed

1948	1949	1950	1951	1952	1953	1954	1955
172	147	246	183	214	161	152	181

Particularly disappointing is the failure to decrease in number the newly diagnosed children. It will be seen that the number of those suffering from non-respiratory tuberculosis has fallen. This can be attributed in part to cleaner milk. The high rate of human tuberculosis amongst children is a further indication of the seriousness of the reservoir of undetected infection.

Tuberculosis in Children—New Cases

	1949	1950	1951	1952	1953	1954	1955
Respiratory	21	21	20	26	28	17	23
Non-respiratory	13	10	20	11	15	2	6
Total	34	31	40	37	43	19	29

Some encouragement may be derived from the changing face of tuberculosis as seen in the new patient. Advanced disease is becoming very much less common and the great majority of new patients now have minimal disease which, with treatment, has an excellent prognosis.

Infectious Cases

The known number of infectious cases has shown a marked tendency to diminish, as shown in the table below. Patients under treatment now become non-infectious in a very much shorter time than formerly.

Known cases of infectious Tuberculosis in last six months of each year.

1949	1950	1951	1952	1953	1954	1955
210	252	232	345	278	129	135

Mortality

The continued fall in mortality throughout England and Wales is reflected in our figures. These give some cause for satisfaction in that they are below the national average. The fall in the death rate, of course, is the direct result of effective treatment.

Pulmonary Tuberculosis—Crude Death Rate per 1,000 persons in the Borough of Luton compared with England and Wales

Luton	1949	1950	1951	1952	1953	1954	1955
	0·50	0·20	0·21	0·15	0·19	0·08	0·08
England and Wales	0.40	0.32	0.27	0.21	0.18	0.16	

Treatment of Tuberculosis

The recent report published in the press by the World Health Organisation attributes the great fall in mortality of tuberculosis in some 30 countries under review to the new anti-tuberculosis drugs. These conclusions can also be correctly applied to Luton. Efforts to make these drugs available without delay have been reasonably successful. In 1955 treatment was commenced on over 360 patients with tuberculosis. The greater part of these were new cases. Treatment took place in hospitals, at home and, in certain cases, while at work. Longer experience with the drugs has increased our knowledge of their power and limitations. It can be said as a generalisation that the present tendency is to keep patients on anti-tuberculosis drugs for very long periods, but to return them to work very much more quickly. Certain selected non-infectious cases may even be treated while at work. The present emphasis on drugs and more active forms of treatment and shorter time in hospital has inevitably led to less pressure on sanatorium beds.

Prevention

- (i) The finding of the new patient with tuberculosis and rendering him non-infectious by treatment as rapidly as possible is the primary objective. The patient after diagnosis ceases to be a grave public health danger as apart from treatment he can by the practice of simple rules of hygiene live safely in the community. The unknown case is the danger.
- (ii) The general practitioner will always remain by far the most important member of any team in the search for new cases of tuberculosis. The table below shows how great is his contribution when measured against the other methods of case finding practised here.

Respiratory Tuberculosis and Cancer of the Lung diagnosed in the Chest Clinic during 1955

	M.M.R.	General . Consult	Pract. Reference Odelca Camera		Total
Cancer of Lung	6	19	17	2	44
Respiratory	20	21	27	22	100
Tuberculosis	39	31	27	23	120

Contact Examination

This is an important part of case finding, as can be seen in the above table. Contact examination must not only include the household contacts and other intimates who are at risk of infection by the patient, but should also include search for the original source of the patient's disease. The latter is often the most difficult and unsatisfactory part of the investigation.

Tuberculin Testing

Tuberculin skin testing of five year old school entrants has been undertaken by the School Medical Officer in Luton during the past year. A positive skin reactor is a child who has been exposed to tuberculosis and as

children of five years old and under move little outside their home environment the infecting source is very likely to be in the home. About five per cent positive reactors would be expected in this age group. The children with a positive skin test are afterwards referred to the Chest Clinic where they are examined to see if they have tuberculosis in its active phase, and the parents and home contacts are also X-rayed in an effort to find the source of infection. As reported by Dr. Edgar, who is carrying out these tests in Luton, a surprisingly small number of children (1.75 per cent) were found to have a positive skin test and nearly half of these were already known to the Chest Clinic. The proportion of parents who were unwilling to have their children tested was considerable and it is too early to say whether this scheme may prove more rewarding in the future.

Miniature Mass Radiography (M.M.R.)

The large Mass X-ray surveys carried out in this area have already been dealt with by the Medical Officer of Health. They have made a very valuable contribution to the anti-tuberculosis campaign. The mobile nature of the mass radiography unit is its great advantage. By bringing the X-ray into the factory a search can be made of a supposedly healthy population which does not go near the family doctor or hospital. It is hoped that these surveys will continue to be made in factories, senior schools and business premises every two years.

The Miniature Fluoroscopic Camera in the Chest Clinic

(Odelca camera)

This is a small, static unit which takes chest X-rays for a few pence and is designed to offer a service to the general practitioner and certain hospital groups of persons such as ante-natal patients. The general practitioner is thus able to send any patient for X-ray without the formality of a detailed letter and appointment with a consultant and in the knowledge that the cost is negligible. Some 15,000 miniature X-rays have been taken by the camera at the Luton Chest Clinic since its installation in 1952. The preceding table shows its success in one year in the detection of tuberculosis and cancer of the lung, both of which may be, for a time, silent diseases.

Bacillus Calmette Guerin Vaccination (B.C.G.)

At the present moment the Medical Research Council's report (M.R.C.) is awaited on the results of a nation-wide investigation of B.C.G. vaccination. Up to the present B.C.G. has been reserved in Bedfordshire for tuberculin negative children and adults who are particularly exposed to infection, i.e. contacts. It may be that as a result of the M.R.C. report all children leaving school who are tuberculin negative will be offered B.C.G. vaccination.

The following were given B.C.G. vaccination during the years 1949–1955

<i>1949</i>	1950	1951	1952	1953	1954	1955
	33	162	153	179	210	271

Conclusions

The number of new cases with respiratory tuberculosis, particularly children, is still high in this area and has shown no tendency to decrease since 1948. There has been a fall in the number of cases with non-respiratory tuberculosis, for the most part due to cleaner milk supplies. It is probable that the non-respiratory tuberculosis existing now is due to infection from a human source.

The reservoir of unknown infection in the community is still a large one, but there are some indications that it may be becoming smaller, as indicated by the Medical Officer of Health. The number of known infectious cases in the area is falling. The number of children who have been infected as school entrants is low, when compared with similar investigations in other towns. Much improved facilities for chest radiography have contributed a large part to diminishing the reservoir, as shown by the greater numbers of early cases presenting themselves for treatment. The success of treatment by the newer methods can be directly measured by the fall in the death rate, particularly in the younger age groups, from which this disease formerly levied its greatest toll."

FOOD POISONING

	otifications ks due to ic	•	 d agen	 ts: 	• • •	• • •	10	
	Outbreaks		_	Cases	• • •	• • •	4	
(Clostridium Welchii Type I) The source of outbreak of Clostridium Welchii was not discovered but was believed to be due to contamination at the time of slaughtering in a slaughterhouse outside the borough.								
` '	ases:— Agent ider Unknown 		•	onella or	ganisı 	ms) 	6 Nil Nil	

NURSING HOMES REGISTRATION, Public Health Act, 1936

The registration of nursing homes is governed by the Public Health Act, 1936, and the responsible authority is the County Council. The County Council have, however, delegated their powers to the Borough Council.

Nursing Homes are inspected monthly and during 1955 no contraventions were found.

Name of Nursing	Date of Registra-	DIVISION OF BEDS					
Home	Borough Council	Maternity	Surgical	Medical	Total		
The Chase	3.4.46,	7	_		7		
Inglewood	8.2.50	6		Sample properties (I)	6		
Totals		13	-	Supply profiting	13		

During the year 122 women were delivered in the Chase Nursing Home, and 55 in the Inglewood Nursing Home.

NATIONAL ASSISTANCE ACT, 1948 AND NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951

Removal to Suitable Premises of Persons in need of care and attention

It was not found necessary during the year to take action under the provisions of the National Assistance Acts for the removal to hospital of any persons requiring care and attention. Several cases were, however, brought to notice, but by introducing a District Nurse or Home Help into the home, or by referring the case to the Welfare Officer, it was possible to improve the circumstances and so enable the patient to remain at home.

HEALTH EDUCATION

During the year seventy-two lectures were given by members of the staff to audiences totalling nearly fifteen hundred persons. The lectures were on the following subjects:—

Food Hygiene 38 lectures Health Services 22 lectures Home Safety ... 12 lectures

Many of the lectures were accompanied by visual aids such as films and film strips.

Twelve showings of the film "X-Ray Inspector" were made at various centres immediately prior to the visit of the Mass Radiography Unit.

The exhibition of posters and distribution of leaflets, etc., was continued as a routine measure throughout the year at welfare centres, day nurseries and the central health department.

PERSONAL HEALTH SERVICES

(LUTON DIVISIONAL HEALTH COMMITTEE)

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

(a) Provision of Clinics

No additional child welfare centres were provided during the year. Thirteen sessions continued to be held weekly at the eleven centres situated in the various parts of the town. Diphtheria immunisation is also carried out at five of the centres.

There was again a slight increase in the total number of attendances when compared with the previous year:—

NUMBER OF CONSULTATIONS, WEIGHINGS, ETC., AT CHILD WELFARE CENTRES, DURING THE YEAR 1955

	Number	0.1	Atten	Medical Officer's Consultations			
	of Sessions	1st	years Sub.	1-5 1st	years Sub.	Under	1–5
						1 year	years
Dallow Road Stopsley Leagrave High St.	48 103 51	148 141 89	3,031 2,782 1,337	1 2 1	554 853 450	847 574 251	243 268 139
Leagrave Marsh Road Round Green	51 52	124 116	2,610 2,046		807 570	572 541	220 195
Castle Street Beechwood Limbury	52 98 102	120 165 160	2,222 2,822 2,785	6 2 4	617 831 842	493 583 528	122 249 247
St. Anne's Farley Hill Park Street	48 52 51	81 105 72	1,442 1,741 1,770	1 4 2	449 607 657	429 487 251	181 251 85
	708	1,321	24,588	23	7,237	5,555	2,200

The following tables show the use made of the child welfare centres by a particular group of children, i.e., those born in 1955.

ATTENDANCE BY SOCIAL CLASS DISTRIBUTION

1955		SOCIAL CLASS						
		I	II	III	IV	V	Illeg.	Total
No. of Births No. attending % attending	• • • •	68 44 64·7	198 129 65·1	912 702 76·9	238 177 74·3	121 84 69·4	70 42 60·0	1,607 1,178 73·3

grd 4

ATTENDANCE BY POSITION IN THE FAMILY

	Position in Family							
1955	First Child	Second Child	Third Child	Fourth or Subsequent Child	Total			
No. of Births No. attending % attending	709 554 78·2	525 360 68·6	221 150 67·9	152 100 65·8	1,607 1,178 73·3			

TODDLERS' CLINICS

Since it is well known that the majority of mothers cease to attend the child welfare centres when their child reaches the age of 12 months, a scheme was introduced in September whereby parents are invited to bring their children to the clinics when they attain their third birthday. The purpose was to enable a medical officer to see each child before it commenced school when arrangements could be made for any defects found to be referred for treatment.

From September until the end of the year, 484 toddlers were invited to attend the clinics but only 163 (33.5%) attended. Of this number 47, or 29.9% of those attending were found to have minor defects.

A full analysis of attendances at Toddlers' Clinics will be included in the Report for 1956.

(b) Premature Infants

A premature infant is defined as one weighing $5\frac{1}{2}$ lbs. or less at birth. The term includes, therefore, somewhat small, but healthy babies who require little more than ordinary care and management, and, on the other hand, infants who are so small that they have little chance of surviving however much care they are given.

Between these extremes are infants who, with expert attention, have a good chance of becoming healthy, vigorous babies, but who would probably not survive the ordinary rigours of early life which the normal baby meets without harm.

Special arrangements for the care of premature infants in their homes are made within the midwifery service, and infants who cannot be cared for at home are admitted to hospital.

Premature births which were registered during the year are analysed in the table overleaf according to place of birth, and birth weight.

REGISTERED PREMATURE INFANTS* CLASSIFIED ACCORDING TO BIRTH WEIGHT

	Total		120	115	110	110
A.W		H	63	61	58	58
4	All	NH	13	12	111	11
i		D	44	42	41	41
	0Z.	I	29	29	29	29
S. S. L.	Over 4 lb. 15 oz. to to 5 lb. 8 oz.	NH	9	9	9	9
2.55	14 10	D	36	35	34	34
)Z.	and	18	18	18	18
Total Control	Over 4 lb. 6 oz. to to to 4 lb. 15 oz.	H	3	3	2	2
4.7	418	A	4	4	4	4
ar sign section .	.20	ĭ	10	10	8	∞
And a	Over 3 lb. 4 oz. to 4 lb. 6 oz.	HN	4	3	3	3
	21 4	D	3	3	3	3
	.2.	-	4	3	2	2
	Over 2 lb. 3 oz. to 2 lb. 4 oz.	D NH				1
	31	D	-			
The Control of the Co	2	Ι	2	1	1	П
Service of the servic	2 lb. 3 oz. or less	D NH		1	1	1
2 to 2 to 2	2.115	D	1	1		
			Number	Number surviving after 24 hours	Number surviving after 8 days	Number surviving at 4 weeks

* Corrected for inward and outward transfers.

-- Domiciliary. NH--Nursing Home. I-Institutional.





Place of Birth

Registered Births

Born in Maternity Institutions:—

(a) Under co	ontrol of	North-	-West I	Regiona	ıl Hosp	ital Boa	ard	63
(b) Other	• • • •	• •	• • •	•••	• • •	• • •	• • •	13
Born at home	•	• •	• • •	• • •	•••	•••	• • •	44
		Tota	ıl	•••	•••	•••	•••	120

(c) Contraceptive Clinic

(i) Orthopaedic Clinic

All patients are referred to the contraceptive clinic by medical practitioners.

Forty-six sessions were held and there were 234 new patients. Subsequent attendances totalled 592

(d) Orthopaedic and Ophthalmic Clinics

Children under the age of five years requiring Orthopaedic or Ophthalmic treatment are referred to the ordinary School Clinic sessions.

Under 1 year 1-5 years

), C			1	0 05
No. of NEW cases	• •	. 6	1	9 25
No. of first attend	ances in	ı		
year	••	. –	4	2 42
No. of subsequen	t atten	**		
1 **	••	. 2	5	2 54
Classification			No. of Cases	Attendances
Anterior Poliomyel	itis		2	3
Bowing of Legs .	••		5	8
Y 1 T	••	• •••	4	7
Knock Knees .			24	43
		• • • •	27	
Metatarsus Varus.	••	• • • •	I	1
Gait	••	• • • •	1	3
Congenital Deform	ities	• • • •	9	21
Spasticity	••	• •••	1	4
Spina Bifida Occul		• ••	1	2
5D . 11'			5	8
Other			14	21
	••	• • • • •		
			67	121
			U	141

Tota₁

Disposal			
No. of cases referred for	exercises	• • •	6
No. of cases referred for	appliances	• • •	2
No. of cases referred for	X-ray examinat	tion	13
No. of cases referred for	admission to ho	ospital	5
No. of cases referred to	Hospital Out-Pa	tients Dept.	1
No. of cases discharged	•••	•••	11
(ii) Ophthalmic Clinic	Under 1 year	Over 1 yea	r Total
No. of NEW cases	7	37	44
No. of first attendances			
year	2	43	45
No. of subsequent att		50	0.0
dances	29	59	88
	Errors of	Other	Prescription
	Refraction		for
	and Squint	•	Spectacles
No. of NEW cases	34	10	2
No. of first attendances	in		
year	42	3	_
No. of subsequent att	en-		
dances	61	27	3
Four children were refer	rred to Hospital	for advice or 1	reatment.

(e) Dental Clinic

Children under 5 years requiring dental treatment are referred to the ordinary School Clinic sessions and during the year 90 children made 98 attendances.

No expectant or nursing mothers received treatment.

(f) Day Nurseries

The three day nurseries in Luton provide accommodation for 140 children—50 at each of the Alder Crescent and Manor Road Nurseries and 40 at the Stopsley Nursery.

Admission to the nurseries is now limited to priority cases—illness of mother, mother obliged to work, bad home environment, straitened financial circumstances, etc., and except in the most urgent cases, all cases are approved by the special sub-committee before their admission to the nursery.

During the year, the Ministry of Health recognised Manor Road Nursery as being suitable for the training of nursery students. All three day nurseries may, therefore, now receive students for training. Two students who took the examination were successful in obtaining the Certificate of the National Nursery Examination Board, whilst another member of the staff was successful in obtaining a Certificate following her attendance at a Supplementary Child Care Course.

	Manor Road	Alder Crescent	Stopsley
No. of Children on Register 1.1.55	50	39	39
No. of Children added to Register	71	82	47
No. of Children removed from			
Register	74	72	46
No. of Children remaining on			
Register 31.12.55	47	49	40
No. of Sessions	254	253	254
Attendances—0–2 years	1,751	2,366	2,615
2–5 years	7,576	6,384	6,414
Total attendances	9,327	8,750	9.029
			-
Average daily attendances (Monday-Friday)	36	34	35

The following table shows the reasons for admissions to the nurseries during 1955:—

Categories	No. on Register 1.1.55	No. admitted during 1955	No. on Register 31.12.55
Illness of Parents	12	39	17
Debilitated Children	5	10	8
Confinement	2	12	6
Illegitimacy	13	16	13
Children of Widows/Widowers	4	3	3
Parents separated	27	26	28
Father in H.M. Forces	5	10	7
Adverse housing conditions, poor			
financial circumstances, etc	60	84	54
Total	128	200	136

The following table shows, by categories, the average number of days (Monday to Friday) each child was in the nursery.

Categories	No. of Children	No. of Days	Average number of days
Illness of Parents	51	2,800	54
Debilitated Children	15	946	63
Confinement	14 29	282 2,959	20 102
Illegitimacy Children of Widows/Widowers	29	1,125	160
1 vs	53	6,010	113
The transfer for the Transfer	15	1,311	87
Advorce housing conditions	18	1,159	64
Poor financial circumstances	115	9,092	79
Other	111	1,422	129
	-		
Total	328	27,106	82

The charge for admission to a nursery is calculated on remaining income after deducting normal household expenses from total income.

The following table shows the fees charged during 1955.

Assessable	Charge	Attending during 1955					
Income	per day	Alder Crescent	Manor Road	Stopsley	Total		
Up to £2 £2—£5 £5—£8 5s. 0d. £8 5s. 0d.—£10	1/6d. 1/9d3/0d. 3/3d5/9d. 6/3d9/3d.	61 20 30 10	52 27 31 11	28 28 26 4	141 75 87 25		
Total		121	121	86	328		

(g) Nurseries and Child Minders Regulation Act, 1948

One Child Minder was registered during the year, but two cancelled their registration. At the end of the year, therefore, there remained two registered Child Minders to receive eleven children and one registered day nursery to receive twenty-five children.

SECTION 23—MIDWIFERY

There are nine full-time domiciliary midwives on the establishment of the Luton Division, all of whom are fully trained in the use of gas and air analgesia and the administration of pethidine.

There were 585 domiciliary confinements attended by the midwives showing a slight increase over the previous year. The total number of visits, 23,624, was the highest number paid during any year by midwives in Luton.

Five hundred and forty-nine (93.6%) of the patients received some form of relief from pain (gas and air or pethidine). It was not possible to administer any analgesia in the remaining 36 cases for the following reasons:—

Precipitate labour ... 32

Analgesia refused by patients ... 4

Part II pupil midwives from the Luton Maternity Hospital continued to receive their three months' district training with the domiciliary midwives and during the year 25 pupil midwives undertook their domiciliary training in Luton.

Summary of Work of Domiciliary Midwives during 1955

	of delivery	Doctor and Midwife present at time of delivery of child	All
Number of deliveries attended	296	289	585
Administration of Analgesia: Gas and Air only Pethidine only Pethidine and Trilene Gas and Air and Pethidine General anaesthetic No analgesia Total	54 7 210 — 25 296	25 12 17 215 9 11	79 19 17 425 9 36

Visits

Visits										
DISTRICT										
Visits	1	2	3	4	5	6	7	8	9	All
Pre-natal Labour Lying-in Period (28 Days)	330 133 1,120		488 309 2,180	565 187 1,881	729 321 2,347	368 147 1,126	574 290 2,204	802 284 2,802	258 163 1,035	4,813 2,062 16,749
Totals	1,583	2,981	2,977	2,633	3,397	1,641	3,068	3,988	1,456	23,624
Number of maternal deaths										
Number	held	• • •	• • •	• •	• •	• • •	• • •	• • •	• •	. 51
Attenda	nces r	nade l	by Pat	ients:	` '			• • •	41]	_
					(b) F	ost-n	atai	• • •	43	- 454
Midwives Cl	inics:									
Number										
Attenda	nces r	nade l	by Pat	tients		• • •	• • •	• • •	• •	. 2,527
Cases in whi	ch M	edical	Aid v	vas so	ught	• • •	• • •	• • •	• • •	. 42

NOTIFICATIONS RECEIVED FROM MIDWIVES DURING THE YEAR 1955

AS I was a firstly to the analysis of the same of the same	2 10 10 10 10 10 10 10 10 10 10 10 10 10	S. 4			
	Nursing Homes	Domi- ciliary Midwives	Maternity Hospital and Extension	Inde- pendent Practice	Total
(a) Intention to practice	5	11	26	1	43
(b) Intention to cease practice	-	2		1	3
(c) Change of address		_	_		
(d) Change of name (e) Sending for medical	_	-	-	_	
help		42		***************************************	42
(f) Stillbirths occurring in practice (g) Deaths occurring in	3	4		—	7
practice—					
(i) Mothers	-	-		_	
(ii) Infants	_	1			1
(h) Laying out the dead (i) Liability to be a		1			1
source of infection	_	6	_	_	6
(j) Substitution of artificial feeding	31	37	77	-	145

Distribution of Midwives, 31st, December 1955

(a)	In Private Nursing Homes	• • •	• • •	3
(b)	Domiciliary Midwives	• • •	• • •	8
(c)	Maternity Hospital and Ext.	• • •	• • •	23
(<i>d</i>)	Private Practice (Independent)	• • •	• • •	Nil

SECTION 24—HEALTH VISITING

The establishment provides for 16 Health Visitors (including the Superintendent Health Visitor). The actual number of health visitors on the staff, however, was only equivalent to 8.5 and the policy of employing State Registered Nurses to work under the direction of individual health visitors was continued. The staff also perform School Nursing Duties.

Three health visitors who completed their training under the Local Health Authority's Student Health Visitor Training Scheme commenced duty during the year and a further two students were accepted for training.

There was an increase of 1,257 effective calls paid over the previous year, and 850 more families were visited. The large increase in Infectious Disease visits was due to the high incidence of measles during the last few months of the year. Some 2,953 non-effective calls were made, an increase of 309 over the previous year, and representing 1 out of every 9.4 calls made.

HOME VISITS BY HEALTH VISITORS

	Chile			dren years		Expectant Mothers		Infant Life	Total
	First Visits	Re- Visits	First Visits	Re- Visits	First Visits	Re- Visits	tious Disease, etc.	Pro- tection	Visits
1946 1947 1948 1949 1950 1951 1952 1953 1954 1955	2,394 2,832 2,167 2,013 1,748 1,782 1,756 1,683 1,536 1,690	4,948 4,194 3,780 3,794 3,274 5,226 6,881 6,801 7,010 6,796	181 359 224 316 175 80 25 30 30 101	7,744 7,072 7,037 8,008 7,987 13,709 13,163 13,157 16,363 15,261	60 68 41 39 2 1 63 62 22 55	19 — — — — — 16	4,352 4,439 4,386 3,122 4,473 984 1,346 963 345 1,151	250 119 122 117 169 152 61 75 10	19,948 19,083 17,757 17,409 17,828 21,934 23,295 22,771 23,812 *25,069

^{*} In addition, 2,953 non-effective calls, not included above, were made.

NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

During the year the Inspectors were responsible for dealing with 18 cases at the request of the Department. All were in the nature of neglect and involved a total of 51 children, and 92 visits were made.

SECTION 25—HOME NURSING SERVICE

There has been a full establishment of 12 district nurses throughout the year. This number includes one relief nurse and one male nurse. For the greater part of the year all but one of the nurses have used motor cars to cover their district.

The policy of employing a male nurse has proved beneficial. His main duties have been with the heavy male patients and those with genito urinary conditions, although he does assist the female nurses in lifting heavy female patients as required.

Heavy demands continue to be made on the service. The number of individual patients visited—1,463—shows an increase of 265 over the previous year, whilst the number of visits paid increased by 10,159 to 43,243.

Seven hundred and sixty six, 52% of the patients attended, were over the age of 65 years. Patients in this age group require the most nursing care.

Many of them live alone and are unable to devote to themselves and in consequence their nursing takes much longer than would be required for a younger patient.

Five thousand nine hundred and sixty-five visits were paid to the 51 diabetic patients as follows:—

16 patients received over 300 visits

2	>>	>>	up	to	300	>>
2	25	>>	,,	>>	200	>>
2	>>	>>			100	>>
2	>>	>>			60	>>
4	>>	>>	>>		40	"
23	>>	22			20	>>

Duration and average number of visits per week:-

weeks	cases	visits	
52	12	4,117	6.5
34	1	212	6.2
33	1	231	7.0
29	1	166	5.7
27	1	187	6.9
24	1	137	5.7
18	1	112	6.2
16	1	107	6.0
15	1	94	6.0
14	2	140	5.0
13	1	46	3.4
9	1	37	4.1
8	1	25	3.1
7	3	84	4.0
5	2	36	3.6
4	7	128	4.5
3	5	60	4.0
2	4	28	3.5
1	5	18	3.6

A total of 1,963 visits was paid to the 65 respiratory tuberculous patients, as follows:—

3	patients	received	ove	er	100	visits
1	>>	>>	up	to	100	>>
7	22	>>	33	>>	80	>>
5	>>	>>	,,	>>	60	>>
13	>>	>>	>>	>>	40	>>
36	,,	>>	22	22	20	,,

Seven hundred and ninety-five visits were paid to 73 children of 14 years of age and under as follows:—

1	patient	received	over	60	visits
2	"	>>	up to	60	,,
6	>>	>>	» »	40	>>
13	>>	>>	» »	20	,,
9	>>	>>	>> >>	10	,,
4	>>	>>	» »	7	>>
7	•	,,	» »	6	"
9	>>	>>	>> >>	5	,,

22 patients received less than 5 visits

Of these cases 24 were in the Gastro Intestinal group, 20 being constipation when an enema was given. 10 cases of Otitis media and 2 respiratory tuberculosis were treated. The 7 in the Accident and Injury group consisted of burns 1; fractures 3; knee injuries 2; lacerated finger 1.

Nursing requisites and sick room equipment are available through the St. John Ambulance Brigade and the British Red Cross Society and during the year 606 articles were issued by the St. John Ambulance Brigade and 97 by the British Red Cross Society.

NUMBER OF CASES ATTENDED

Type of Case	District										All
	1	2	3	4	5	6	7	8	9	10	
Acute Medical Chronic Medical Surgical Tuberculosis Infectious disease Abortion Other	71 49 25 5 1	43 54 28 6 —	33 50 16 6 1	85 46 20 12 —	51 92 38 18 2	61 21 25 4 1	55 49 27 8 —	80 38 22 4 —	30 81 26 4 1	63 53 41 11 1 2	572 533 268 78 2 6 4
Totals	152	131	106	164	201	112	139	144	143	171	1,463

NUMBER OF VISITS

		District									
Type of Case	1	2	3	4	5	6	7	8	9	10	All
Acute Medical Chronic Medical Surgical Tuberculosis Infectious disease Abortion Other	1,023 2,113 999 232 5 9	593 1,610 1,623 224 —	1,898 1,788 477 194 — 5	1,619 1,399 948 393 — 50	623 2,443 1,033 337 — 19	1,324 1,086 509 143 — 12	927 2,888 1,185 238 —	1,412 1,658 549 140 —	413 3,003 929 113 — 12 9	812 2,389 1,181 623 20 — 11	10,644 20,377 9,433 2,637 25 57 70
Total	4,381	4,050	4,362	4,409	4,455	3,074	5,238	3,759	4,479	5,036	43,243

CASES ATTENDED BY TYPE, AGE AND SEX

			M	ale					F	emale			
Type			Ages in	n Years	3				Ages in	n Year	3		All
	0-4	5–14	15–24	25-44	45–64	65 +	0-4	5-14	15–24	25–44	45-64	65 +	
Cardio-vascular Lesions Genito-urinary Condi-	_	-	_	3	20	35	_	-	_	3	20	82	163
tion Neoplasm Respiratory T.B Surgical T.B		<u>-</u> 1 1	$\frac{-}{2}$	3 14 4	2 21 17	$\frac{10}{21}$		<u>-</u> 1	$\frac{5}{11}$	10 1 12 4	6 20 7 1	5 40 —	38 106 65 13
Other Respiratory Infections Other Infections Gastro-intestinal Dis-	2	2 5	1 2	5 6	26 5	32 2	1 2	1 3	1 6	4 12	14 8	34 3	123 5 5
orders Preparation for X-ray Post Operative Treat-	4	9	2	7 7	10 22	18 16	6	5	<u>5</u>	22 18	13 28	27 22	128 114
ment Rheumatism and Arth-	—	2	3	8	11	37	tace/school	2	3	15	19	25	125
ritis Blood Diseases Diabetes Accident and injuries Senility Skin Diseases Gynaecology Hemiplegia Ear, Nose and Throat Varicose Ulcers Disorders of Nervous System Other Conditions	$\frac{1}{1}$ $\frac{1}{3}$ $\frac{3}{1}$	1 -4 -4 -2		2 1 4 — 6 — 2 4	1 2 1 2 3 -5 -2 1 3	3 3 7 5 22 6 21 1 1 8 3		1 - - 3 - 1	1 - - 1 3 - 4 -	-6 1 2 -3 11 -112 5	7 4 6 3 	22 14 34 22 60 9 34 43 4 6	34 31 51 42 82 28 58 79 43 10
Total	13	31	14	76	154	252	12	17	45	142	193	514	1,463

DURATION OF NURSING CARE (Completed cases only)

Type of Cases	7 days or less	8–28 days	1–3 months	3–6 months	Over 6 months	All
Acute Medical Chronic Medical Surgical Tuberculosis Infectious Disease Abortion Other	295 145 59 6 1 2 2	134 114 76 15 1 4	32 55 42 23 —	21 30 18 4 —	14 45 17 8 —	496 389 212 56 2 6 3
Total	510	345	152	73	84	1,164

SECTION 26—VACCINATION AND IMMUNISATION

Vaccination

Vaccination in the normal way is carried out entirely by the family doctor. The figures for 1955 show a decrease of 33 primary vaccinations and 23 re-vaccinations.

	Under 1 year	1 year	2–4 years	5–14 years	15 years and over	Total
Primary vaccination Re-vaccination	489 —	29	31	90 8	132 154	771 162
Totals	489	29	31	98	286	933

Immunisation

Immunisation sessions for both Diphtheria and Whooping Cough are held monthly at seven of the Child Welfare Centres in addition to the session held each month at the central clinic at Dallow Road.

Whooping Cough Immunisation was first undertaken on 1st November, 1954, and therefore for the first time the results of a full year's working of the scheme are available

Immunisation against Diphtheria or Whooping Cough may be carried out separately or it may be combined. In the case of Whooping Cough or Whooping Cough/Diphtheria combined, immunisation usually takes place when the child is 5–6 months old, whereas for Diphtheria alone it is not carried out until the child is at least 8 months old. Re-inforcing courses for Diphtheria take place when the child commences school.

The number of children who received immunisation for whooping Cough, i.e. Whooping Cough alone or Whooping Cough/Diphtheria, was 1,241, and for Diphtheria, i.e. Diphtheria alone or Whooping Cough/Diphtheria, was 1,559. It should be remembered that whereas Whooping Cough immunisation is limited to children under 2 years (preferably 5–6 months old) Diphtheria immunisation is carried out at any age after 8 months.

No. of immunisation sessions held at Clinics	• • •	96
No. of children immunised at clinics		
Diphtheria only	306	
Diphtheria and Whooping Cough	492	
Whooping Cough only	71	
		869
No. of children immunised by general practitioners		
Diphtheria only	131	
Diphtheria and Whooping Cough	630	
Whooping Cough only	48	
		809
Total number of children immunised against Diphtheria		1,559
Total number of children immunised against Whooping Co	ugh	1,241
No. of re-inforcing sessions held at school		29
No. of re-inforcing courses at clinics	• • • • • • • • • • • • • • • • • • • •	87
e e e e e e e e e e e e e e e e e e e	• • •	
No. of re-inforcing courses at schools	• • •	576
No. of re-inforcing courses by general practitioners	• • •	333
Total number of re-inforcing courses	• • •	996

Number of Children who had completed a full course of Immunisation at any time up to 31st December, 1955.

(According to Health Department Records)

Age at 31.12.55	Under 1 year	1 year	2 years	3 years	4 years	5 to 9 years	10 to 14 years	Total under 15
Number Immunised	154	1,153	1,246	1,544	1,474	8,575	5,379	19,525
Estimated mid-year Population, 1955	9,114					17,2	343	26,457

Immunisation state of the child population at 31st December, 1955.

	Under	1-4	5–14	Total
	1 year	years	years	under 15
Estimated percentage immunised	9.0%	73·1%	80·4%	73.8%

DOMESTIC HEALTH SERVICE

The service has now become firmly established as providing an integral part of the National Health Service and during the year an average of 249 families received assistance each week. The amount of assistance provided varies but depends upon the requirements of each case.

During the year a total of 719 families received assistance and this is the highest number of families since the commencement of the scheme in 1948.

The greatest demand (44%) for domestic help continues to come from aged persons. The initial request for home help assistance is usually made because of illness, but many old people become so dependent upon the home help that it is impossible to withdraw the assistance. It should be emphasised here that the Home Help and Home Nursing Service working together so improve the domestic circumstances of many old people that hospital care becomes unnecessary.

One hundred and twenty-seven (17%) of the cases dealt with were for emergency illness and a further 119 (16%) were maternity cases. No charge was made in 49 cases, a further 312 were assessed and paid a reduced charge and the remainder (358) paid the full cost for the service rendered.

The "Sitters-up Service" which was instituted during the year provided 175 nights' assistance in 21 cases.

Number of full-time home helps on books at 31st December, 1955	23
Number of part-time home helps on books at 31st December, 1955	52
Number of householders helped during the year:	
(a) Matamitra acces	

(a)	Maternity ca	ses		• • •	119			
(b)	Tuberculous	cases	• • •	• • •	17			
(c)	Other cases	• • •	• • •	• • •	583	Total	• • •	719
Number	of hours of a	assistance	provi	ded du	ring the	year:		

Number of nours of assist	tance pro	oviaea c	iuring the	year:		
(a) Maternity cases	•••		5,957	•		
(b) Tuberculous case	es	• •••	$2,120\frac{1}{4}$			
(c) Other cases	• • • • • • •	• • • •	$71,195\frac{3}{4}$	Total	• • •	79,273
Number of cases in which	h full fee	was no	t charged:			

(a)	Maternity cases	• • •	• • •	26			
(b)	Tuberculous cases	•••	• • •	5			
(c)	Other cases	• • •	• • •	330	Total	• • •	361

£6,021

Cost to local authority of assessed cases

AMOUNT OF ASSISTANCE PROVIDED WEEKLY

Type of Case	Up to 8 hours	8-12 hours	12-20 hours	20-30 hours	Over 30 hours	Total	% of Whole
Pregnancy and Confinement	18	11	25	11	54	119	16.6
Tuberculosis	11	5	1			17	2.4
Chronic Illness	36	6	2	1	-	45	6.3
Hospital, or Ex-Hospital	62	19	11	2 5		94	13.0
Emergency, or other Illness	69	34	17	5	2	127	17.7
Aged Persons	275	35	7	EVE/1976		317	44.0
Total	471	110	63	19	56	719	
Percentage of whole	65.6%	15.3%	8.8%	2.6%	7:7%	100%	100%

LENGTH OF TIME ASSISTANCE PROVIDED

Type of Case	Up to 4 weeks	1–3 months	3–6 months	6–12 months	Over 12 months	Total
Pregnancy and Confinement Tuberculosis Chronic Illness Hospital, or Ex-Hospital Emergency, or Other Illness Aged Persons	106 3 8 32 63 26	10 2 13 44 46 35	2 3 5 13 8 40	1 3 4 2 5 5	6 15 3 5 160	119 17 45 94 127 317
Total	238	150	71	71	189	719
Percentage of whole	33·1%	20.8%	9.9%	9.9%	26.3%	100%

INCOME GROUPS

Gross	Up to 8 hrs.			8–12 hrs.		12-20 hrs.		20-30 hrs.			Over 30 hrs.		hrs.		
Income	Free	Assd.	Full rate	Free	Assd.	Full rate	Free	Assd.	Full rate	Free	Assd.	Full rate	Free	Assd.	Full rate
Pensions, etc. Others under	41	190 28	=	7	20 8		1	5			1	· _	_		=
£5 £5-£6 £6-£7 £7-£8		10 3 2		_	5 2 1			2		=		=	=	<u>-</u>	
£8-£9 £9-£10 £10 and over			=	_	<u></u>	\equiv		3 2	=		1 3			8 10	=
Income not disclosed	_		196	_		66	_		50	_		12	_		34
Total	41	234	196	7	37	66	1	12	50	_	7	12	_	22	34

PROBLEM FAMILIES

The Local Health Authority approved the principles of circular 27/54 issued by the Ministry of Health, urging Local Health Authorities to interest themselves in problem families before conditions deteriorated to the extent of involving the exercise of statutory functions. The County Health Committee authorized the Chairman of the Divisional Health Committee on the advice of the Divisional Medical Officer to provide free home helps or "Sitters Up" where a family unit showed signs of breaking up or where such provision was considered essential. In addition, in order to avoid as far as possible officers of different departments conducting individual enquiries to see whether their services were required, it was decided to place in the hands of the Divisional Medical Officer the investigation of cases which were found to involve more than two services. The co-ordination of the services both statutory and voluntary in Luton has become the responsibility of the Divisional Medical Officer, who arranges meetings of the officers of the local authority and other statutory services and of local representatives of the voluntary organizations.

During 1955 six families were brought to the notice of the co-ordinating committee. Of these one family responded to the assistance provided, three showed no improvement and the break up of the remaining two could not be prevented.

ENVIRONMENTAL HEALTH SERVICES

REPORT

OF THE

Chief Sanitary Inspector

Public Health Department, 63–69, Guildford Street, LUTON.

February, 1956.

His Worship the Mayor, Aldermen and Burgesses of the Borough of Luton.

Ladies and Gentlemen,

The Compulsory Purchase Order containing the two clearance areas referred to in the Report for 1954 was the subject of a Public Inquiry in April, 1955, and towards the end of the year it was confirmed, with minor modifications, by the Minister of Housing and Local Government. The clearance of the 54 houses in the area is expected to take place shortly and it is the intention of the Council to build flats on the site to provide accommodation for over 60 families.

During 1955 further progress was made towards implementing the Council's programme for the clearance of unfit houses. In December seven Clearance Areas comprising 75 houses were represented to a joint meeting of the Housing and Estates and Public Health Committees. Six of the areas form a compact unit for development in the High Town area which is zoned for light industry. In addition, 17 houses were dealt with individually by means of Closing and Demolition Orders.

Only 36 Certificates of Disrepair have been issued since the Housing Repairs and Rents Act came into operation, and repairs carried out justified the revocation of the certificates in only five cases. This would appear to support the general opinion that the provisions of the Act, which were intended to arrest the deterioration of repairable dwellings, have not been entirely successful.

The number of caravans in the town being used as permanent homes has increased from 36 in 1950 to 238 last year. A survey carried out early in the year showed that 40 caravans were occupied by families each comprising a husband and wife and two or more children, and by no standard could these caravans be regarded as providing satisfactory accommodation. Under the Town Planning Acts a measure of control is exercised over the siting of caravans, and conditions are attached to licences to ensure that orderliness and sanitation are maintained, but notwithstanding, they constitute an ever growing problem. In an effort to meet it the Council propose to build a Municipal site to accommodate 100 caravans, the site being capable of extension for a further 150.

The report of the Inter-departmental Committee on slaughterhouses was received with mixed feelings. While it was gratifying to learn that

Luton was regarded as a suitable centre for a slaughterhouse area, it was disappointing to read that the Committee recommended the repeal of the law dealing with restrictions on private slaughterhouses where a public one exists. This recommendation, if adopted, would undoubtedly be a retrograde step.

The temporary Municipal slaughterhouse at Windmill Road which was opened in 1954 has proved, together with two private slaughterhouses in the town, to be sufficient to meet local needs. During the year 6,729 animals were slaughtered in the Municipal Abattoir. In the early and late months of the year the slaughterhouse was busy, but it has never been used to full capacity. Improvements carried out during 1955 included the installation of an electric saw and the provision of offices and messing accommodation. Ministerial approval was received for the slaughterhouse to be used as a grading centre for all classes of animals. It is disappointing that more butchers do not make use of the facilities provided.

The continued reduction over the past five years in the incidence of tuberculosis in animals slaughtered is shown in the table on page 70. The amount of meat condemned in 1955 was also lower than in any year since the war. Similar trends are recorded in other areas and reflect the success of the Government plan for the eradication of tuberculosis from our domestic herds.

Food hygiene continues to receive close attention. The frequent inspection of catering premises and improving of premises where food is sold, the taking of bacteria swabs of kitchen equipment and lectures to personnel, have all contributed towards an improvement in the standards of food hygiene. There is evidence that food handlers generally are showing an increasing awareness of the need for constant care to prevent the contamination of food.

The Milk (Special Designation) (Specified Areas) Order, 1955, came into effect on the 21st March and provided another safeguard for Luton's milk supply. For many years the amount of undesignated raw milk consumed in the town has been small and rarely have tubercle bacilli been found in it. But now that all milk is tuberculin tested or heat treated there should be no risk of tuberculous infection from this source. To ensure that the heat treatment carried out is effective, it is frequently checked. During the year, 355 milk samples were examined and all but eight of them satisfied the phosphatase test. The number of dairies now processing milk in the town is five, the three larger ones using H.T.S.T. pasteurising plants.

The report on samples taken under the Food and Drugs Act and analysis of samples in connection with atmospheric pollution was kindly prepared by the Public Analyst, Mr. Harcourt Wordsworth.

I wish to express my thanks to Officers of the Corporation for their ready advice and assistance, and to Inspectors and Staff for their loyalty and hard work throughout the year.

I have the honour to be,
Your obedient servant,
G. F. MACEFIELD.
Chief Sanitary Inspector.

SANITARY CIRCUMSTANCES OF THE AREA

GENERAL

The area of the borough is 8,773 acres and the present estimated population is 113,800. The surface is undulating, the town having been built substantially in a valley in the Chiltern Hills, usually described as the "Lee Gap". The surface level varies from some 330 feet above sea level to a little more than 600 feet above sea level.

The principal industries are the manufacture of private and commercial motor vehicles and associated trades, chemicals, electric cookers, gas and electric refrigerators, and hats.

Meteorology.—The Luton Meteorological Station, which is under the control of the Borough Engineer, is situated in Wardown Park, New Bedford Road. During the year the following observations were taken:—

Sunshine.—1,464·2 hours of sunshine were recorded, the sunniest day being 12th July, 1955, when 13·5 hours were recorded.

Rainfall.—The total rainfall recorded was 21·19 inches, the wettest day being 16th May, 1955, when 0·86 of an inch of rain was recorded.

Temperatures.—The maximum temperature was 85°F., recorded on 17th July and 22nd August, 1955, and the minimum temperature was 9°F., recorded on 20th February, 1955. The mean temperature for the year was 48.29°F.

Wind.—The prevailing wind was South-West.

WATER SUPPLY

		1954 million gallons	1955 million gallons
(1)	Estimated total consumption for the Borough	1.000	0.102
	—whole year	1,980	2,123
(2)	Estimated domestic consumption for the		
	Borough—whole year	1,138	1,182
(3)	Estimated industrial consumption for the		
	Borough—whole year	842	941
(4)	Average chlorination	0·25 p.p.m.	0·25 p.p.m.

With a population of 113,800, the total number of gallons used per head per day was approximately 51, an average of 28 gallons per head per day for domestic use, and 23 gallons per head per day for industrial purposes.

The following additional information has been supplied by the Luton Water Company.

Resources

"The abstraction from the Lee Valley has been reduced since the 26th March, 1954, when Friars Wash Pumping Station commenced producing water for consumption. This has allowed abstraction at Crescent Road and Runley Wood Pumping Stations to be reduced to approximately their estimated safe yield.

Developments

"The Chaul End Service Reservoir (capacity 5 million gallons) in connection with the Friars Wash Scheme, is nearly completed. The construction of the Friars Wash Pumping Station and the installation of the permanent pumping plant is in hand. A 12" link main from Collingdon Street to Waldeck Road has been laid during the past year and a similar link from Chaul End Lane to Leagrave High Street is at present being installed. Construction of a 1 million gallon service reservoir should commence early in 1956 together with necessary additional mains to augment the supply to North West High Level Area.

Distribution

"During 1955, $4\frac{1}{4}$ miles of distribution mains were laid at the following sites:—

Vauxhall Park

Hillary Crescent (Meyrick Ave)

Gooseberry Hill, R.D.C.

Selbourne Road

Sundon Park Estate R.D.C.

Lane Farm Estate

Sowerby Avenue

Tancred Road

Moat Lane Estate

Armitage Gardens

Rosslyn Crescent

Old Bedford Road

Vincent Road

Wood Green Road

Stoneygate Road

Runfold Estate No. 1

Barton Road R.D.C.

Runfold Estate No. 2

Grasmere Avenue R.D.C.

Barnfield Road

Dunstable Road

Swifts Green Road

Fairford Avenue

New Estate off Turners Road

Warwick Estate R.D.C.

Sampling of Water

"All sources of supply are analysed by the Local Public Health Laboratory Service at weekly intervals, the Public Analyst making a more detailed analysis of each source at monthly intervals.

Plumbo-Solvency of Water

"We are informed by the Water Pollution Research Laboratory that the water supplied from our chalk wells at Crescent Road is slightly plumbosolvent. Tests were carried out on a length of unused lead pipe and it was found that although the percentage of lead dissolved in the water was relatively small, this quantity was not reduced over a period of 14 days by any insoluble coating being formed on the inside of the pipe. In these circumstances although the quantity of lead dissolved in the water is small

we are advised by the Water Pollution Research Laboratory not to use lead pipe for drinking water services. Plumbo-solvency is not usually associated with waters as hard as that supplied by this Company, but we understand that the percentage of carbon dioxide in the water is rather higher than normal which accounts for this exceptional case.

"In the past no lead service pipes have been fitted in the Borough, at any rate during the present century, and instruction to plumbers carrying out work in the area of supply have always insisted on the use of steam quality galvanised tube for all water services. However, short lengths of lead pipe connecting the galvanised pipe to wash-basins or to water closet cisterns have been permitted, and it is considered that the use of such short lengths is not a source of danger. This practice is still continued although the Company prefers the use of copper throughout the whole of the plumbing installations and the total avoidance of lead wherever possible."

The following is a copy of the Public Analyst's latest report on the mains supply submitted by the Luton Water Company on 13th December 1955:—

No. 1/134 Crescent Road No. 5 Well, Unchlorinated.

No. 2/134 Crescent Road No. 5 Well, Chlorinated.

No. 3/134 Runley Wood (Chalk), Chlorinated.

No. 4/134 Runley Wood, Greensand, Filtrate.

No. 5/134 Friars Wash (Chalk), Chlorinated.

Chemical Analysis

·				Parts per 100,000							
				No.	No.	No.	No.				
				1-2/134	3/134	4/134	5/134				
Free Ammonia	• • •	• • •	• • •	0.0002	0.0002	0.0002	0.0002				
Albuminoid Ammonia		• • •	• • •	0.0002	0.0002	0.0004	0.0002				
Oxygen absorbed in 4	hours	at	80°F.	0.020	0.030	0.055	0.027				
Nitrites	•••	• • •	•••	Nil	Nil	Nil	Nil				
Nitrogen as Nitrates	•••	• • •	• • •	0.741	0.371	0.073	0.381				
Chlorine	•••	•••	• • •	3.0	1.9	1.9	1.7				
'Hardness, Total	•••	• • •	• • •	36.0	39.0	25.0	31.5				
Hardness, Permanent	• • •	• • •	• • •	10.5	12.5	5.5	4.0				
Total Solids	•••	• • •		45.5	48.7	31.0	34.5				
Sulphate as SO ₄	•••	• • •	• • •	$4 \cdot 4$	10.1	4.3	0.7				
pH value	• • •	• • •	•••	6.8	6.8	6.8	6.8				

All samples were clear and free from smell.

The microscopic examination revealed the presence of some mineral and vegetable fragments.

No.

No.

No.

No.

No.

Bacteriological	Examination
-----------------	-------------

		1/134	2/134	3/134	4/134	5/134			
Number of organisms	•	·	,	,	,	•			
ml. growing at 22°C. 3 days	•••	26	. 1	1	1	2			
Liquefying organisms	• • •	3	Nil	Nil	Nil	1			
Number of organisms ml. growing at 37°C.		2							
48 hours	• • •	2	3	2	6	2			
Bacillus Coli	• • •	from	absent from	absent from 100 ml.	absent from	absent from 100 ml.			
Ominion		100 1111.	100 1111.	100 1111.	100 1111.	100 1111.			
Opinion	• •	• •	C		1 0 11	•			
These samples are considered satisfactory and suitable for dietic use.									
No. of dwellings supplied from piped water mains direct to the houses 33,865									
No. of dwellings sh	arin	g nined	water sun	nlies	• • •	100			
No. of dwellings su			-	Pileo		. 2			
•				1 A .1	•••				
No. of samples of examination by			•		•				
for free chlorine				•••	•••	204			
Number of samples of v	vate	r obtaine	d from:—	_					
Crescent Road P	ump	ing Stati	ion	* * •	91				
Runley Wood Pu	ımpi	ng Statio	on	• • •	78	3			
Friars Wash Sup	ply	• • •	• • •	• • •	33	3			
Other Sources		••	• • •	• • •	2	2			
					91/10/20	- 204			

Classified results of the above samples:—

Class 1—Highly Satisfact	ory	• • •	• • •	• • •	203
Class 2—Satisfactory	• • •	• • •	* * *	• • •	0
Class 3—Suspicious	• • •	•••	•••	• • •	0
Class 4—Unsatisfactory	• • •	• • •		• • •	1 204
					201

The unsatisfactory sample was taken from one of the two remaining wells in the district. Arrangements were immediately made for the occupants to use a nearby piped water supply, and although a subsequent sample of the well water proved satisfactory, it is not being used for dietic purposes. The system of bi-weekly sampling of the various sources at the Luton Water Company's stations was maintained throughout the year. All results proved satisfactory.

Three water samples were taken from the two private wells supplying dwellinghouses and submitted to the Public Analyst who reported upon them as satisfactory. Two further samples were taken from a well being used by a caravan dweller. The Public Analyst reported adversely upon this source and an undertaking was received from the owner of the land to provide the caravan dweller with water from his own piped supply. The occupier has since been rehoused by the Corporation.

SEWERAGE AND SEWAGE DISPOSAL

The drainage of the Borough is on the separate system, except in the Stopsley area and the old part of the Borough where it is combined.

The soil water sewage is dealt with at the New Mill End Sewage Purification Works by sedimentation followed by bio-aeration and bacterial filtration. Before its final discharge to the river, it receives additional treatment through sand filters and micro-strainers. The final stage of treatment is necessary because of the lack of dilution in the river and also because the river is later used as a source of water supply. The sludge is treated with lime and sulphate of iron, dried and sold for manurial purposes.

CLOSET ACCOMMODATION

The following table shows the number of pail closets, chemical closets and cesspools serviced in the Borough at the end of December, 1955:—

Pail and chemical closets ... 150

Cesspools 109

Thirteen cesspools were abolished and one constructed during the year.

All pail closets are emptied either once or twice weekly between the hours of 6 a.m. and 7 a.m.

Cesspools are emptied by means of mechanical plant as and when required. Five hundred and ten emptyings were arranged during the twelve months ended 31st December, 1955.

PUBLIC CLEANSING—REFUSE DISPOSAL

The following information is supplied by the Director of Public Cleansing.

"Labour shortages were again experienced and the refuse collection service was maintained with difficulty.

"The method of refuse disposal is controlled tipping and during the year 1955 the weight of refuse dealt with was 55,818 tons."

SANITARY INSPECTION OF THE AREA

NUMBER AND NATURE OF INSPECTIONS MADE

ary Inspection	ns:									Nc
Where nuisan	ces we	re fou	nd			• • •	• • •	• • •	• • •	1,6
Where comple	aint wa	as rece	ived an	d no ni	iisance	found		• • •		1
Under Housin			• • •	• • •	• • •	• • •	• • •	• • •		j
Where Infect						• • •				j
70 1 1							• • •	• • •	* * *	
0		• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	,
_		•••	• • •	• • •	• • •	• • •	• • •	• • •	• • •	2
Caravans, Te	-		• • •	• • •	• • •	• • •	• • •	• • •	• • •	4
	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	4
		• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
Fish Curing I	Premise	es					• • •	• • •		
Fish Frying I	remise	es			• • •		• • •	• • •		
Food Preparis					• • •		• • •	• • •		
Food Preparis					• • •	• • •	• • •	• • •		
Food Storage				•••						
Houses Let in					• • •	• • •	• • •	• • •	• • •	
Marine Store		_	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
		• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
Markets and	_	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
Offensive Tra	ldes	• • •	• • •	• • •		• • •		• • •		
Offices	• • •				• • •	• • •	• • •	• • •		
Overcrowding	7		• • •	• • •	• • •		• • •			
Public House	S			• • •			• • •			
Restaurant K	itchens			• • •	• • •	• • •				4
Slaughterhou					• • •	•••				1,0
Cabaala	•		_	•						
Shops Act, 19	 250 Se			• • •	• • •	• • •	• • •	• • •	• • •	•
				• • •	• • •	• • •	• • •	• • •	• • •	
Stable and Pi				• • •	• • •	• • •	• • •	• • •	• • •	
Theatres and				• • •	• • •	• • •	• • •	• • •	• • •	
Urinals—Pub	ne and	i Priva	te	• • •	• • •	• • •	• • •	• • •	• • •	
er Visits or In	-			1						
Number of di			-		• • •	• • •	• • •	• • •	• • •	
Food Inspect	ion (ex	ciuain	g Slaug	nterno	uses)	• • •	• • •	• • •	• • •	
	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
Lectures	• • •	• • •	• • •	• • •	• • •	• • •		• • •		
Insect Pests I	nvestig	gations	(exclu	ding bu	gs)					
Bug Infestation			• • •		• • •		• • •			
Atmospheric				• • •	• • •		• • •			(
Visits to Boile				• • •	•••	• • •	• • •	• • •		
Smoke Obser		-		• • •	•••		• • •	• • •		
Merchandise						• • •	• • •		• • •	
				• • •	• • •	• • •	• • •	• • •	• • •	
			1	· · · · · · · · · · · · · · · · · · ·	• • •	• • •	• • •	• • •	• • •	
						• • •	• • •	• • •	• • •	
Rag Flock and	in Wat					•••	• • •	• • •	• • •	•
Rag Flock and Visits to obtain		od and					•	• • •		
Rag Flock and Visits to obtain Visits under the second sec			•	work i	n prog	ress	• • •			4,
Rag Flock and Visits to obtain			otice or	AA OTIC 1						
Rag Flock and Visits to obtain Visits under the second sec	erty u		otice or			• • •				_
Rag Flock and Visits to obtain Visits under the Visits to proprogramme of the Visits to obtain the Visits the V	erty u	nder n	• • •	• • •	•••	• • •		• • •		,
Visits to obta Visits under t Visits to prop	erty u	nder n	otice or				• • •		• • •	(

^{*} These figures do not include 562 complaints and 903 primary visits in connection with Rats and Mice, which are dealt with elsewhere in the Report.

ABATEMENT OF NUISANCES

Drainage reconstructed	•••	•••	•••	•••		•••	• • •	21
Drainage repaired, trapped, et	c.	• • •	•••	•••			•••	138
Drainage unstopped	• • •	•••	• • •	•••	•••	•••	• • •	538
Chambers constructed	• • •	•••	• • •	• • •	• • •	•••	• • •	15
Repairs to chambers or new co	vers	• • •	• • •	• • •	•••	•••	• • •	29
Cesspools emptied because of	overflov	V	•••	•••	•••	•••	• • •	8
Cesspools replaced by water ca	rriage s	ystem		• • •	• • •	• • •	• • •	13
Soil or vent pipes—new fixed	•••	•••	• • •	•••	•••	• • •	• • •	6
Soil or vent pipes—repaired	•••	•••	• • •	• • •	•••	• • •	• • •	11
Water closets—repaired or sup	plied w	ith wat	er	• • •	•••	•••	• • •	120
Water closets—new pans or pe	destals	fixed	• • •	•••	• • •	• • •	• • •	100
Water closets—additional cons	tructed	• • •	• • •	• • •	• • •	• • •	• • •	1
Waste pipes—repaired or trapp	ped	•••	•••	• • •	• • •	•••	• • •	29
Waste pipes, R.W.P.'s and eav	esgutte	rs repai	red	•••	•••	•••	• • •	161
Accumulations of refuse remov	ved	•••	•••	•••	• • •		• • •	22
Animals, fowls, etc	• • •	• • •	• • •	•••	• • •	• • •	• • •	1
Brickwork or pointing repaired	l	•••	• • •	• • •	• • •	• • •	•••	79
Coppers repaired or renewed	• • •	•••	• • •	•••	•••	• • •	• • •	2
Dampness remedied	• • •	• • •	• • •	•••	•••	•••	• • •	103
Dustbins supplied	• • •	• • •	• • •	• • •	•••	• • •	• • •	42
Fireplaces, stoves and flues rep	aired	• • •	• • •	• • •	•••	•••	• • •	57
Flooring and other woodwork	repaired	d or ren	iewed	• • •		• • •	• • •	103
Floors—concrete or quarried r	epaired	or rene	ewed	• • •	• • •		• • •	13
Gas fittings or services repaired	d	• • •	• • •	• • •	• • •	• • •	• • •	3
Overcrowding abated	• • •		• • •	• • •	•••	• • •	• • •	8
Plaster repaired	• • •	• • •	• • •	• • •	• • •		• • •	148
Rats and mice infestations abat	ed	•••	•••	•••	• • •		• • •	782
Rent books made to comply wi	ith the	require	ments o	of Hous	sing Ac	t	• • •	1
Roofs made watertight	• • •	•••	•••	•••	•••	• • •	• • •	227
Smoke nuisances	• • •	• • •	•••	•••	• • •	•••	• • •	1
Walls and ceilings cleansed	• • •	• • •	•••	•••	•••	• • •	• • •	4
Water supplies reinstated or m	ade sufl	ficient	•••	•••	•••	•••	• • •	6
Windows—cords, fasteners and	l glass r	epaired	or ren	ewed	•••	•••	• • •	115
Premises treated against insect	pests	•••	•••	• • •	• • •	•••	• • •	36
Verminous rooms fumigated	•••	•••	• • •	• • •	•••	•••	• • •	203
Yards and passages paved	• • •	• • •	•••	•••	• • •	•••	• • •	8
Miscellaneous	•••	• • •	• • •	• • •	• • •	• • •	• • •	47
To	TAT.							3,201

STATUTORY NOTICES

NUMBER OF LEGAL NOTICES ISSUED FOR ABATEMENT OF NUISANCES

•				Served	Complied with
Name to a second second second	Tadiasa 21a4 1	D 1054			
Number of Outstanding N	_	Dec., 1954	• • •	12	12
Public Health Act, 1936.	Section 24	• • •		52	52
Public Health Act, 1936.	Section 39	• • •		30	25
Public Health Act, 1936.	Section 45	• • •		23	20
Public Health Act, 1936.	Section 56	•••		3	3
Public Health Act, 1936.	Section 75	•••		9	9
Public Health Act, 1936.	Section 93	• • •	• • •	55	42
					reside or annual section of
				184	163
				-	

No. of Outstanding Notices at 31st December, 1955 21

In three instances owners of property appealed against notices of the local authority served under Section 75 of the Public Health Act, 1936, requiring them to supply dustbins. In each case the Bench allowed the appeal with costs and directed that the tenants should supply the bins. Consequent upon these decisions the Council gave consideration to the possibility of adopting a municipal scheme for the provision of dustbins. The issue was still under consideration at the end of the year.

Failure to comply with the requirements of Statutory Notices resulted in the work being carried out in default by the Corporation in three cases. In each instance the necessary steps were taken for the recovery of the costs incurred. An application was received from the owner of one house for work required under the Public Health Act to be done by the Council on the owner's behalf. Under the provisions of Section 275 of the Act the Council agreed to this course and to the repayment of the costs by instalments.

DISINFECTION

Premises visited where notifiable diseases have occurred	97							
Cases removed to Isolation Hospital	28							
Rooms disinfected after infectious, contagious or other disease	153							
Premises where repairs or redecorations have been carried out after								
infectious diseases	3							
Visits paid to ascertain if notices to repair or redecorate have been								
complied with	8							
Rooms disinfected by occupiers	40							
Premises visited tracing infectious disease	163							
Articles disinfected by steam	635							
Articles disinfected by fumigants	834							
Articles destroyed at request of owners	279							
Total visits paid to infected premises	171							

Four hundred library books were withdrawn from circulation and were disinfected before they were returned.

DISINFESTATION

Rooms disinfested for vermin or other insect pests		• • •	254
Articles disinfested by steam			63
Articles destroyed at request of owners	• • • •	• • •	48
Wasps nests destroyed	• • • •	• • •	4

On five occasions infestations by uncommon insects occurred. Specimens were sent to the British Museum for identification in each instance and the premises disinfested in accordance with the advice received.

Where serious infestation by the larvae of the common furniture beetle (woodworm) was reported, spraying with an insecticide containing DDT was carried out. In this connection three premises involving five rooms were treated. Effective treatment for this complaint is a long and tedious process however, and can only be properly carried out by the occupier.

Thirty-two infestations by bed bugs were found during the year, and in all instances disinfestation was carried out. The use of liquid vermicide was relied upon for treating the infestations, and proved satisfactory. In two instances further treatment was necessary.

The following table shows the number of premises and rooms dealt with during 1955:—

	Number o	f Premises	Number of Rooms		
	Found to be infested	Disin- fested	Found to be infested	Disin- fested	
Number of Council Houses Number of other Houses Number of cases where disinfestation has been carried out prior to removal from Clearance Areas, etc., into new	12 20	12 20	32 74	32 74	
Council Houses Number of cases where disinfestation has been carried out				-	
by Corporation Disinfecting Officer Number of cases where disin- festation has been carried out	32	32	106	106	
by Occupants or Contractors					
Number of complaints of infestation received (27)	27	27	80	80	
Number of cases found by Sanitary Inspectors	5	5	26	26	

RATS AND MICE DESTRUCTION

A maintenance treatment of the sewers for rat infestation was carried out in February and March. Three hundred and sixty-eight manholes were treated and 62 pre-bait takes observed. There were 43 complete poison takes on one or both days.

The majority of rodent infestations dealt with were again treated by an

anti-blood coagulent rodenticide. This method is economical of labour and does not induce bait shyness.

Assiduous attention has been paid to the few sites in the Borough which are frequently infested by rats. At no time did the infestations get out of hand and the Corporation's Refuse Tip has been maintained in a condition virtually free from rats.

An analysis of the work is detailed below:—

	Com- plaints received	No. of premises involved	Treatment com-pleted	Treatment in progress	Bodies found
Private { Rats Dwellings { Mice	390 69	556 81	565 80	20 4	38 220
Business { Rats	52	70	71	5	3 312
Premises { Mice	51	66	66	5	
Totals Rats	442	626	636	25	41
Mice		147	146	9	532

In dealing with the above-mentioned infestations, the rodent operatives paid a total of 3,424 visits. Two hundred and thirty-seven visits were also made to infestations by the Sanitary Inspectors.

PUBLIC SWIMMING BATHS

The Baths Superintendent has kindly supplied the following information:

"There are two Public Swimming Baths in the Borough, both owned by the Corporation.

"The Public Baths are situated in Waller Street, Luton, and consist of a covered Swimming Pool, 46 Slipper Baths and one vapour Bath. The Open Air Pool situated off New Bedford Road, Luton, caters for swimming and bathing only.

"During the season of 1955, the following numbers attended:—

						Waller Street	Open Air
						Baths	Swimming
							Pool
Swimmers	• • •	• • •	• • •	• • •	• • •	52,871	86,635
Spectators	• • •	• • •	• • •	• • •	• • •	1,672	11,358
Clubs	• • •	• • •	• • •	• • •	• • •	10,610	_
Slipper and	Vapour	Baths	• • •	• • •	• • •	61,598	
Schools	•••	• • •	• • •	• • •	• • •	18,738	12,815
						probleminary your distinction of	
	Tot	al	• • •	• • •		145,489	110,808

"Chloroscope examinations of the water are carried out by the attendants twice a day, and in addition, samples of the water are sent to the Borough

Chemist for examination each month. During the past year, reports have been satisfactory."

In addition three samples of baths water were taken from the Public Baths and the Luton High School pool by Sanitary Inspectors and sent to the Borough Chemist for examination. All were satisfactory.

PLACES OF PUBLIC ENTERTAINMENT

Inspection of sanitary accommodation in the cinemas and theatres has been made during the year. Where minor sanitary defects were found, they were attended to.

The sanitary accommodation at the Luton Town Football Ground was found to be in need of improvement. Considerable alterations were carried out including the renewal of urinals and the installation of new accommodation under the "Bobber's Club" Stand.

ATMOSPHERIC POLLUTION

The four recording stations maintained by the Department continued to operate throughout the year. Three of these consisted of a standard deposit gauge and lead peroxide candle, and one of lead peroxide candle only.

The contents of the various instruments are forwarded monthly to the Public Analyst for examination. Results are sent to the Director, Fuel Research Station, East Greenwich, for inclusion in the National Bulletin which is published monthly.

A volumetric apparatus for recording sulphur dioxide and suspended matter is operated at the Town Hall. From this, daily readings are taken. These results are forwarded to East Greenwich for inclusion in the National Bulletin.

The report of the Public Analyst contains his observations on the results obtained from the various instruments.

During the year, 40 smoke observations were made on industrial premises in the Borough and 2 warnings issued about the excessive emission of smoke.

SHOPS ACT, 1950

Section 38 of this Act is administered by the Public Health Department.

Sixteen visits were paid to shop premises during 1955 investigating the sanitary accommodation provided. Three notices were served respecting contraventions found.

PET ANIMALS ACT, 1951

This Act regulates the conditions in which pet animals are kept pending sale. It provides for the licensing of premises from which pet animals are sold and empowers a local authority to make conditions regarding the housing and care of the pets.

During the period under review 14 visits were paid to the seven premises so licensed to ensure that the requirements of the Act were complied with.

RAG FLOCK AND OTHER FILLING MATERIALS

Three premises are registered for the manufacture of new articles containing filling materials and six samples of assorted materials were taken for examination and reported upon as satisfactory.

OFFENSIVE TRADES

The two offensive trades were conducted satisfactorily during the year and a total of five inspections of the premises were made.

THE FACTORIES ACT, 1937

INSPECTIONS

Premises inspected	• • •	• • •		• • •	• • •	• • •	463
Premises inspected and foun	d satis	factory	• • •	• • •		• • •	433
Premises inspected and foun	d unsa	atisfacto	ory	• • •		• • •	30
Factories where defects were	found	and re	ferred	by H.A	1. Inspe	ector	6
Reports on action taken sent				• • •	•••	• • •	6
Number of defects remedi		_		H.M.	Inspec	tor's	
notifications	• • •	• • •	• • •	• • •	•••	• • •	7
LIST	OF D	EFEC	TS FO	DUND			
Classings went of							2
Cleanliness, want of		• • •	• • •		• • •		2
Dilapidations, general		• • •	• • •	0 6 4	* * *	• • •	
No intervening ventilated lo	•		• • •	• • •	• • •	• • •	2
0 0	•••	•••	• • •	• • •	• • •	• • •	1
Water Closet, unsuitable or	defect	ive	• • •	• • •	• • •		4
" not lighted	• • •	• • •	• • •	• • •	• • •	• • •	1
,, dirty condition	n	• • •	• • •	• • •	• • •	• • •	14
" needing repair	r	• • •	• • •	• • •	• • •	• • •	3
" without indica	ation	• • •	• • •	• • •	• • •	0 • •	5
" insufficient	• • •		• • •	• • •	• • •	• • •	2
Washing facilities absent				• • •	• • •	• • •	1
Rat or mouse infestation	• • •	• • •	• • •	• • •	• • •	• • •	56
Abstract not posted		• • •		• • •	• • •	• • •	1
Miscellaneous	• • •	• • •					3
							97

The one remaining underground bakehouse was allowed to continue during the year in consideration of the particular personal hardship involved.

At 31st December, 1955, there were 751 factories (mechanical power) and 43 factories (non-mechanical power) on the register. These figures include 195 hat manufacturers and 66 allied trades.

1			S	17 Car 27 - 18 x			Y- 11		94 -	11)		
		rs	Contracto	11		11	11	1	111	11	111	1
1	р «	и	Morkme	6		4	-	000	007	11	<i>ω</i> - 1	14
I	eceive other orities	SIS	No. of Li		4			4		9		9
	Lists received from other Authorities	No. of Local	from whom Lists have been Received		4			4		9		9
1		ors	Contracto				11	1	111	11	111	
	ded	и	Workme	322	34	9	٦	365	605	30	117	639
	sts forward to other Authorities	sts	No. of Li		31			31		124		124
	Li	No. of Local Authorities	to whom Lists of Outworkers have been Forwarded		20			20		115		115
	in nises I.A.	9£61 "∀ suc	Prosecution Sec. 153, P.H.A.	S	eld	÷ 4.	نہ	1	s ·	eld it.	ن ب	
	Outwork in ected Premi 2. 153, P.H. 1936	9261 "∀ 9399	Sec. 153, P.H.A	Where cases have arisen	work mas been withheld by verbal	arrangement. No separate	records kept. 	1	Where cases have arisen work has	been withheld by verbal arrangement.	No separate records kept. 	
	Outwork in Infected Premises Sec. 153, P.H.A. 1936	S	Sonstant	Whey have	been with	arran No s	recor 		Where ca	been with by verbal arrangem	No s recor	
1000		suc	Prosecutio	11		11	11	1	111	11	111	1
9	ers in e Prem Factor 937	rved	Notices Se	11	1	11	11		111	11	111	1
	Outworkers in Unwholesome Premises Section 111, Factories Act, 1937	No. of Instances of Work	in Unwhole- some Premises	1 1	1	11	11			11	111	1
	S 1937	No. of Prosecutions for Failure to Supply Lists			1	11	11		111	11	111	
	OUTWORKERS LISTS Sections 110, Factories Act, 1937	No. of Cases of Default	in sending Lists to the Council	1 1	1	11			111	11	111	
	TWOR 3 110, 1	from ind ities	Contractors	111	1	1 1	11		111	11	111	
	OU	Lists received from Employers and Other Authorities	Workmen	1,485	257	31	18	1,814	1,687	246	33	2,004
		Lists r Emp Other	stsiJ	116				125	116 2 1	<i>∞</i> ⊢ -		126
	NATURE OF WORK			Making, etc., of Wearing Apparel Box Making I amphade Making	Leather and Fancy Goods	Feather Mounting Artificial Flowers	Plastic Goods Paper Bags, etc	Totals	Making, etc., of Wearing Apparel Box Making Lampshade Making	Goods Feather Mounting	Button Covering Artificial Flowers Plastic Goods	Totals
				12	AUS 1AU	SET.	I		RNS	ELU	В	
in.			5 11 11 11 11 11							-	3.1	



CLEARANCE AREAS — NEW TOWN STREET



THE LAST OF THE COMMON LODGING HOUSES

HOUSING

Six thousand, three hundred and seventy-four inspections of 2,353 dwellinghouses for housing defects were carried out under the Public Health and Housing Acts during the year. Seventy-five houses were inspected for inclusion in Clearance Areas, 17 for treatment under Sections 11 and 12 of the Housing Act, 1936, and 17 prior to the issue of Certificates of Disrepair, involving a total of 576 visits. Eight Demolition Orders and 2 Closing Orders (Local Government (Miscellaneous Provisions) Act, 1953) were made, undertakings were accepted in respect of 5 houses, 25 were demolished in pursuance of Demolition Orders and the Corporation themselves acquired and demolished eight houses. Two Closing Orders in respect of parts of buildings were made under Section 12 of the Housing Act, 1936.

Action was initiated for the repair of defects at 1,358 dwellinghouses and repairs were effected informally at 1,292 houses. Statutory Notices were served in respect of 144 premises; 75 were complied with by owners and at 59 houses the work was carried out by the Corporation. The majority of the latter were in connection with the Corporation's responsibilities under Section 24 of the Public Health Act, 1936.

Five new cases of overcrowding were reported during the year and eight were relieved. At 31st December, 1955, 76 houses were overcrowded, including four Council houses.

INSPECTION AND SUPERVISION OF FOOD

FOOD AND DRUGS ACTS, 1938–1950

MILK

Milk and Dairies Regulations, 1949 to 1954	
No. of persons registered as Distributors	226
No. of premises registered as Dairies	13
Milk (Special Designation) (Pasteurised and Sterilised N Regulations, 1949 to 1953	Milk)
No. of Dealer's (Pasteuriser's) Licences	5
No. of Dealer's Licences to use the special design Pasteurised	ation 53
No. of Supplementary Licences to use the special design Pasteurised	ation 3
No. of Dealer's Licences to use the special design Sterilised	ation 211
No. of Supplementary Licences to use the special design Sterilised	ation 3
Milk (Special Designation) (Raw Milk) Regulations, 194	l9 to 1954
No. of Dealer's Licences to use the special design tuberculin tested	ation 38
No. of Supplementary Licences to use the special design Tuberculin Tested	ation 3

BACTERIOLOGICAL EXAMINATION OF MILK

Consequent upon the designation of Luton as a Specified Area, 390 samples of milk were submitted for bacteriological examination as compared with 278 in 1954 (see table on page 65).

The percentage of pasteurised milks satisfying the phosphatase test was $98\cdot21\%$ ($98\cdot48\%$ in 1954), and $96\cdot97\%$ of tuberculin tested (pasteurised) milks passed the test ($95\cdot83\%$ in 1954).

BACTERIOLOGICAL EXAMINATION OF MILK

	Per- centage Satis- factory			1	100.00	j	Ţ	
	Turbidity Test	Failed		ļ	0)]	1
	Turb Te	Passed)	9	İ	•	
G	Per- centage Satis-	factory		98.21		26.96	ļ	1
	natase st	Failed		4		4	ĺ	
	Phosphatase Test	Passed		219		128	1	
	Per- centage Satis-	factory		69.55		100.00	88-46	100.00
Samples	Cancelled Statutory Minimum	Temperature not reached		2			l	
	ylene Test	Failed		-		0	3	0
	Methylene Blue Test	Passed		220		132	23	3
	Total Samples Sub- mitted			223	9	132	26	3
	Designation of Milk			:	:	:	:	•
				Pasteurised	Sterilised	Tuberculin Tested (Pasteurised)	Tuberculin Tested	Ungraded

EXAMINATION OF MILK

SECTION 8, FOOD AND DRUGS (MILK, DAIRIES AND ARTIFICIAL CREAM) ACT, 1950

Four samples of milk were taken and tested by guinea pig inoculation, and of these three were found to contain brucella abortus. In each instance of samples containing brucella abortus, the County Medical Officer of Health was immediately notified as required by the Act. In each case the milk concerned was produced outside the Borough.

BACTERIOLOGICAL EXAMINATION OF WASHED CHURNS AND MILK BOTTLES

Twenty-four batches, consisting of 222 washed milk bottles, were taken for examination during the year. Twenty batches were reported upon as satisfactory and four as fairly satisfactory.

Three batches, each of six churn rinsings, were also taken for examination. A number of churns were reported upon as unsatisfactory and examination of the churn washing machine resulted in the discovery of a choked hot rinse jet. After this was rectified, further samples proved satisfactory.

REGISTRATIONS OF PREMISES USED FOR THE MANUFACTURE, STORAGE OR SALE OF FOOD

	Premises on Register 31st, Dec. 1954	Conditional Approvals outstanding 31st, Dec. 1954	No. of Applica- tions received during 1955	Trans- ferred from Manu- facture	No. of Certifi- cates issued	No. of Condi- tional Appro- vals can- celled	No. of Condi- tional Appro- vals outstan- ding 31st Dec., 1955	No. of Applica- tions refused	No. of Premises re- moved during 1955	Total on Register at 31st, Dec. 1955
Sale and storage of Ice Cream	305	4	20	_	17		7	_	1	321 .
Manufacture of Ice Cream	8	_	1	_	1					9 3
Manufacture of Preserved Food	69		1		1					70
Fish Frying and Curing	3 3	_			_	-	_		2	31 1
Butter and Margarine Dealers	2	-	_	_	-	_	_	-	_	2 2

FOOD HYGIENE

The number of establishments serving meals and snacks on the register at 31st December, 1955, was 368. During the year 10 new premises were established and 19 closed.

The following list shows	s the va	arious	types of	f premis	ses on	the regist	er:—
Restaurants	• • •	• • •	• • •	• • •	• • •	76	
Snack Bars	•••	• • •	• • •	• • •	• • •	36	
School Canteens	•••	• • •	• • •	• • •	• • •	32	
School Kitchens or	ıly	• • •	• • •	• • •	• • •	17	
Factory Canteens	• • •	• • •	• • •	• • •		46	
Canteens serving S	nacks (only	• • •	• • •	• • •	37	
Commercial Hotels	and B	oardin	g Hous	es	• • •	5	
Social Clubs	• • •	•••	• • •	• • •	• • •	4	
Mobile Canteens	• • •	• • •	•••	• • •	o. • • •	2	
Public Houses incl	uding t	those s	erving	Snacks	• • •	113	
During the year the une	der-me	ntione	d work	was car	rried o	ut:	
Number of visits a				• • •		1,103	
Number of interview	ews hel	d	• • •	•••	• • •	119	
Number of letters	sent or	arran	gements	made	• • •	93	
Number of letters	or arra	ngeme	nts com	iplied v	vith	99	
Number of Lecture	es give	1	• • •	• • •	•••	38	
Number of Persons	atteno	ding L	ectures	• • •	• • •	674	
Work carried out:-							
New canteen kitche	ens con	struct	ed	• • •	• • •	1	
Premises completel	y rede	corated	1	• • •	• • •	28	
Premises partly red	lecorate	ed	• • •	• • •	• • •	41	
Water heaters insta	lled	• • •	•••	• • •	• • •	5	
Walls and ceilings	cleanse	d	• • •	• • •	• • •	14	
Wash-basin provide	ed		• • •	• • •	• • •	1	
Miscellaneous worl	ζ	• • •	• • •	• • •	• • •	13	
						102	
						103	

All plans concerning food premises submitted to the Borough Engineer were examined before being submitted to the Planning Committee and amendments obtained where necessary; the premises were visited and the proprietors advised of the equipment required to maintain a good hygienic standard.

Thirty-eight lectures with the aid of films and film strips were given during the year. One firm allowed all food handlers employed to attend a course of six weekly lectures given by the Specialist Inspector. The results of a test given at the end of the course were most gratifying and proved that the staff had listened with intelligence and keen interest.

Utensil swabbing was continued during 1955 in 40 different food

establishments such as canteens, school kitchens, hotels and restaurants, made up of:—

Plates	• • •	•••	•••	152
Cups	• • •	• • •	• • •	246
Beakers	• • •	•••	• • •	36
Glasses	• • •	• • •	• • •	3
Miscellaneo	ous	• • •	• • •	3
	Total	• • •	• • •	440

Out of the 440 swabs taken, 322 returned a total count of less than 100 colonies per utensil. Of the other 118 swabs taken, 41 returned a count of between 100–200 colonies, 10 between 200–300, 20 between 300–500, 21 between 500–1,000, and 26 over 1,000.

These results were not so good as last year, particularly as in three cases faecal coliform was found. Subsequent samples were taken and in two cases were satisfactory but the third premises again showed faecal coli. A test washing-up session was held and the staff instructed in procedure, washing hands before commencing, using the proper amount of detergent, etc., and the ensuing results were satisfactory. There is no actual standard laid down in this country, but in the United States of America any count below 100 colonies is considered hygienically satisfactory. The fact that over 73% of the samples achieved this, indicates that a fairly good standard is being maintained.

On completion of the survey of Public Houses it was found that only one licensed house was without a hot water supply to the bar sink and this will be installed by the owners. This house also used lined lead pipes to draw beer from the cellar and these are to be replaced with a set of plastic pipes. Samples of beer from the house were satisfactory.

The sanitary accommodation of the public houses was found to be adequate, although a number of urinals were of poor construction and lacked automatic flushing cisterns. The Brewers have promised, when repairs are carried out at the varous premises in the near future, to replace the urinals with glazed stalls and to supply automatic cisterns.

ICE CREAM

Twenty samples of ice-cream were examined by the Public Health Laboratory Service.

Judging the samples of ice-cream on the time taken to decolorise Methylene Blue and applying the Public Health Laboratory Service grading, the results of the examinations are shown below:—

PUBLIC HEALTH LABORATORY SERVICE GRADING						
Grade 1 Grade 2 Grade 3 Grade 4						
16 3 1 —						

MEAT INSPECTION IN SLAUGHTERHOUSES

The temporary slaughterhouse owned by the Council at Windmill Road continued to operate throughout the year. The use made by local butchers of the services provided has been disappointing. A number of traders continued to use slaughtering facilities provided in neighbouring districts and a further number took advantage of relatively advantageous terms offered for the purchase of meat on the hook by wholesale suppliers. Two privately owned slaughterhouses licensed by the Council were used by the firms concerned on a somewhat lower scale than the previous year when slaughtering control operated for the first six months. One hundred per cent meat inspection was maintained in the three establishments.

In one instance a meat specimen was submitted to the Public Health Laboratory for a pathological report. This service is very useful where doubt arises in respect of obscure diseases or conditions.

CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed	4,820	523	790	8,826	8,573	23,532
Number inspected	4,820	523	790	8,826	8,573	23,532
All diseases except Tuberculosis and Cysticerci: Whole carcases condemned	3	_	5	2	5	15
Carcases of which some part or organ was condemned	1,715	171	2	369	528	2,785
Percentage of the number inspected affected with disease other than tuber-culosis and cysticerci	35.64%	32.70%	0.89%	4.20%	6.22%	11.90%
Tuberculosis only: Whole carcases condemned	14	1	_		2	17
Carcases of which some part or organ was condemned	347	71	1	_	193	612
Percentage of the number inspected affected with tuberculosis	7.49%	13.77%	0.13%		2.27%	2.67%
Cysticercosis: Carcases of which some part or organ was condemned	22					22
Carcases submitted to treat- ment by refrigeration	22	_	_			22
Generalised and totally condemned						

The total number of animals slaughtered and examined during the year showed a decrease of 4,517 or 16 per cent. under 1954. Eighteen complete beef carcases and offals were condemned from all causes as against 30 the previous year.

The percentages of the number of animals inspected affected with tuberculosis maintained the improvement shown in recent years. The figure for cows shows a dramatic reduction and is probably affected to some degree by the improved quality of the cows slaughtered, in addition to the beneficial influence of the successful national policy for the elimination of the disease from dairy herds.

The following table shows comparative figures for the past five years.

PERCENTAGE OF NUMBER INSPECTED AFFECTED WITH TUBERCULOSIS

	Cattle excluding Cows	Cows	Calves	Pigs
1951	12·43	35·21	0·20	5·27
1952	10·42	26·89	0·17	4·96
1953	9·42	26·45	0·15	4·97
1954	9·03	23·39	0·10	2·40
1955	7·49	13·77	0·13	2·27

SLAUGHTER OF ANIMALS ACTS, 1933-1954

Number of Slaughtermen on Register at 31st December,	1954	•••	30
Applications for Licences considered during 1955	• • •	• • •	22
Number of Slaughtermen on Register at 31st December,	1955	• • •	21

MERCHANDISE MARKS ORDERS

One hundred and four visits were made by the Sanitary Inspectors to food shops and the market and 20 contraventions of the labelling provisions of the various orders were found. As usual the vendors quickly rectified the omissions when their attention was drawn to the facts.

Some difficulty arose during the year in respect of the labelling of tomatoes. The Order is difficult to enforce as foreign, empire and home produced fruits are marketed at the same time of year. Three samples of tomatoes were taken for examination by an expert and the services of an official of the Tomato Marketing Board co-opted.

Explanatory pamphlets setting out the shopkeepers' obligations under the Merchandise Marks Orders are available upon request.

INSPECTION OF MEAT AND OTHER FOODS

The amount of unsound food condemned and destroyed during the year comprised:

No. of Condemnation Notes	Article		Weight in lb.
	Beef	• • •	57,097
	Pork	• • •	5,392
	Mutton	• • •	1,068
	Meat other than from Slaughterhouses	• • •	1,584
	Meat—Canned	• • •	3,213
	Meat Pies and Pastes	• • •	13
	Bacon	•••	45
	Sausages	• • •	147
	Rabbit—Fresh and Canned	• • •	90
	Chicken—Fresh and Canned	• • •	10
	Fish—Fresh and Canned	• • •	1,107
1,823	\langle Fruit—Canned and Fresh, and Fruit Juice	s	9,100
	Fruit—Dried	• • •	47
	Preserves—Canned		208
	Vegetables—Fresh and Canned, and Sour		1,985
	Milk—Canned, Evaporated and Dried	• • •	696
	Cream—Fresh and Synthetic		15
	Cheese—Fresh and Processed	•••	311
	Eggs—Frozen		76
	Bread, Cakes and Puddings		44
	Cereals		28
	Pickles		4
	Miscellaneous	•••	8
	(•••	9
1,823	36 tons 14 cwts. 2 qrs. 24 lb.		82,288

The above statement includes the weight of the entire carcases and organs of 17 cattle excluding cows, 1 cow, 5 calves, 2 sheep and lambs and 7 pigs.

Offal condemned at the slaughterhouses in the town and at butchers' shops in the Borough is collected by an approved contractor who subjects this material to a steam digestion process. Carcases of beef are sent to Whipsnade Zoo where they are used for feeding the animals. The remainder of the condemned food is disposed of by supervised burial on the Corporation's Airport Tip.

In connection with the tracing of food poisoning incidents, 8 samples of food were delivered to the Laboratory for bacteriological examination.

During the early summer it was learned that Chinese egg albumen which was imported into the country for use in the baking industry, contained a food poisoning organism. Six samples were taken but in no case was evidence of the organism found. Visits were paid to bakehouses and wholesale grocers and advice given on the storage and proper use of the commodity.

REPORT OF THE PUBLIC ANALYST FOR THE YEAR 1955

Food and Drugs Act

The number of samples submitted for examination was 320 out of which 20 were found to be "not genuine".

Most of the samples reported against were milk samples taken during the course of delivery. Many were deficient in fat although two were certified as containing small amounts of extraneous water.

There are still many milk samples examined which do not contain sufficient milk solids to conform with the legal statutory minimum. These milk samples can be shown to contain no added water and they can be described only as "poor quality". The production and sale of such milk becomes a matter of the customer paying a standard price for a sub-standard article although the milk can legally be classed as genuine. The introduction of herds giving a greater volume of milk has, in many cases, resulted virtually in the water being added inside the cow. The latter then produces a legally genuine milk. This does not apply to all samples and by far the larger number are shown to be milk of good quality, but over the past few years there has been a tendency for these abnormal samples to show some increase in numbers.

The new Food and Drugs Act comes into operation on the 1st January, 1956. There are many changes and some time must elapse before the full implications of the Act are seen but it will undoubtedly strengthen the hand of the Local Authority in its protection of the consumer.

Atmospheric Pollution

The measurement has been continued of the amount of matter brought down by rain from the air and of the amounts of sulphurous compounds present in the atmosphere.

The introduction of the regulations governing smoke emission and the vast amount of time spent on atmospheric pollution and its publicity, and the creation of smokeless zones in some large towns and cities is gratifying as showing that public opinion is now behind the efforts of those local authorities who have for years been trying to bring about some abatement of this evil which has been with us for so long.

It is doubtless true to say that there is less smoke in Luton now than there was some years ago and the reduction has been brought about by the vigour with which the investigation was carried out and the continued co-operation of the various factories concerned.

C. HARCOURT WORDSWORTH,

Public Analyst

SAMPLING OF FOOD AND DRUGS

Butter — 9 Meat and meat products — 12 Confectionery, sweets, etc. — 7 Fish—canned, and fish and meat paste — 9 Fruit—fresh, preserved and canned — 42 Groceries—miscellaneous — 18 Jam, honey, marmalade, etc. — 11 Lard, cooking fat and suet — 17 Margarine — 2 Milk and milk foods (canned) and cream — 15 Milk — — 15 Milk — — 8 Patent medicines and chemical substances — 1 12 Sausages and sausage meat — — 8 Temperance drinks and non-alcoholic wines — 7 Wines, spirits and beers — 9 Ice-Cream — 12 Totals — 27 293	Nature of Sample	Formal	Informal
	Butter Meat and meat products Confectionery, sweets, etc. Fish—canned, and fish and meat paste Fruit—fresh, preserved and canned Groceries—miscellaneous Jam, honey, marmalade, etc. Lard, cooking fat and suet Margarine Milk and milk foods (canned) and cream Milk Patent medicines and chemical substances Sausages and sausage meat Temperance drinks and non-alcoholic wines Wines, spirits and beers Ice-Cream	 18 1 8 	9 12 7 9 42 18 11 17 2 15 103 12 8 7 9 12

SUMMARY OF CHEMICAL ANALYSES OF MILK SAMPLES

Period	No. of Samples	AVERAGES		
T CHOC	Examined	Fat %	Solids not Fat	
January February	. 15	3·91 3·32 3·51	8·64 8·38 8·60	
Quarter ended 31.3.55	. 32	3.52	8.51	
April	. 9	3·27 3·04 3·26	8·60 8·56 8·76	
Quarter ended 30.6.55	. 32	3.21	8.65	
July August September	. 11	3·12 3·78 3·76	8·76 8·72 8·60	
Quarter ended 30.9.55	. 33	3.53	8.70	
October	. 9	3·57 3·72 3·77	8·90 8·69 8·56	
Quarter ended 31.12.55	. 24	3.64	8.80	
Year ended 31.12.55	121	3.46	8.65	

Of the samples analysed, 20 were reported to be not genuine, details of which, and the action taken in regard thereto, are appended. All milk samples mentioned form parts of consignments taken in transit from dairy farms.

1,000	1 10	9 4 7 7 7 1 1 1 1 1			
Sample No.	Formal	In- formal	Article	Adulteration or other Irregularity	Action taken
503 505 507 582 586 587 591 696 710 712 715 831		1 1 1 1 1 1 1 1 1 1	Milk Milk Milk Milk Milk Milk Milk Milk	Fat deficient 7% Fat deficient 3% Fat deficient 2% Fat deficient 5% Fat deficient 9% Fat deficient 4% Fat deficient 12% Fat deficient 12% Fat deficient 14% Fat deficient 2% Fat deficient 3% Fat deficient 17% Fat deficient 18%	Average fat contents of total consignments did not fall below statutory minimum in any instance. Appropriate action taken where necessary.
525		1	Milk	Extraneous water 1.6%	Formal samples subsequently obtained and found to be genuine.
592 593		1	Milk Milk	Fat deficient 9% } Fat deficient 10% }	Average fat content of total consignment of 2 churns was 2.71%. Farmer ceased production before formal samples could be obtained.
700 701		1	Milk Milk	Fat deficient 15% Fat deficient 21%	Average fat content of total consignment of 2 churns was 2.45%. Formal samples subsequently procured and found to be satisfactory.
764		1	Milk	Extraneous water 1%	Hortvet -0.528°C. From one churn in a consignment of 5. No action.
800		1	Nerve Tonic	Deficient in Potassium Bromide 50%	Formal sample subsequently taken and proved to be genuine.
858		1	Shredded Beef Suet	Free fatty acids 7.4%. Excessive free fatty acids and rancid	Upon investigation it was found that sale of this commodity had been discontinued and formal samples could not be procured.

0.5

13.6

Winter Average Oct. 1953–Mar. 1954 0.4

8.4

Year's Average

ATMOSPHERIC POLLUTION—SUMMARY OF OBSERVATIONS

DEPOSITED MATTER EXPRESSED AS TONS PER SQUARE MILE

PER SQUARE MILE PER MONTH

1953-1954

SULPHUR COMPOUNDS BY LEAD PEROXIDE METHOD EXPRESSED AS MILLIGRAMS SO₃/DAY/100 CM² LEAD PEROXIDE

SUSPENDED MATTER AND SULPHUR DIOXIDE BY VOLUMETRIC METHOD Suspended Matter expressed as milligrams per 100 cubic metres

Sulphur Dioxide expressed as parts

1953-1954

per 100 million

Sulphur Dioxide

Suspended Matter 0.2

3.1

Summer Average April-Sept. 1953 ...

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THE STATE OF	20 20 10 15 15		
Con- naught Road	2.50	3.73	3.12
Luton High School	0.71	1.63	1.17
Beech Hill	66.0	1.56	1.28
Town Hall	26.0	2.32	1.65
	Summer Average April-Sept. '53	Winter Average Oct.'53-Mar.'54	Year's Average

9.50

13.95

12.05

Summer Average April-Sept., 1953 ... 12.25

18.13

20.26

Winter Average Oct. 1953-Mar. 1954 16.04

16.16

Year's Average

1954-1955

Luton High School

> Beech Hill

> Town Hall

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-	4

1954-1955

ır le	1 S C 1		
Sulphur Dioxide	0.7	2·3	1.5
Suspended Matter	3.8	12.1	8.0
	Summer Average April–Sept. 1954	Winter Average Oct. 1954–Mar. 1955	Year's Average

10 90 5	w for the second		
Luton High School	11.31	15.85	13.58
Beech	14.82	24.73	19.78
Town Hall	11.25	18-49	14.87
	Summer Average April–Sept. 1954	Winter Average Oct. 1954–Mar. 1955	Year's Average

	Town	Beech Hill	Beech High Hill School	Con- naught Road
Summer Average April-Sept. '54	1.01	26.0	62-0	2.36
Winter Average Oct.'54-Mar.'55	2.56	1.93	1.87	3.50
Year's Average	1.79	1.45	1.33	2.93

Deposited Matter (tons per sq. mile per month) Jan.—Dec., 1955

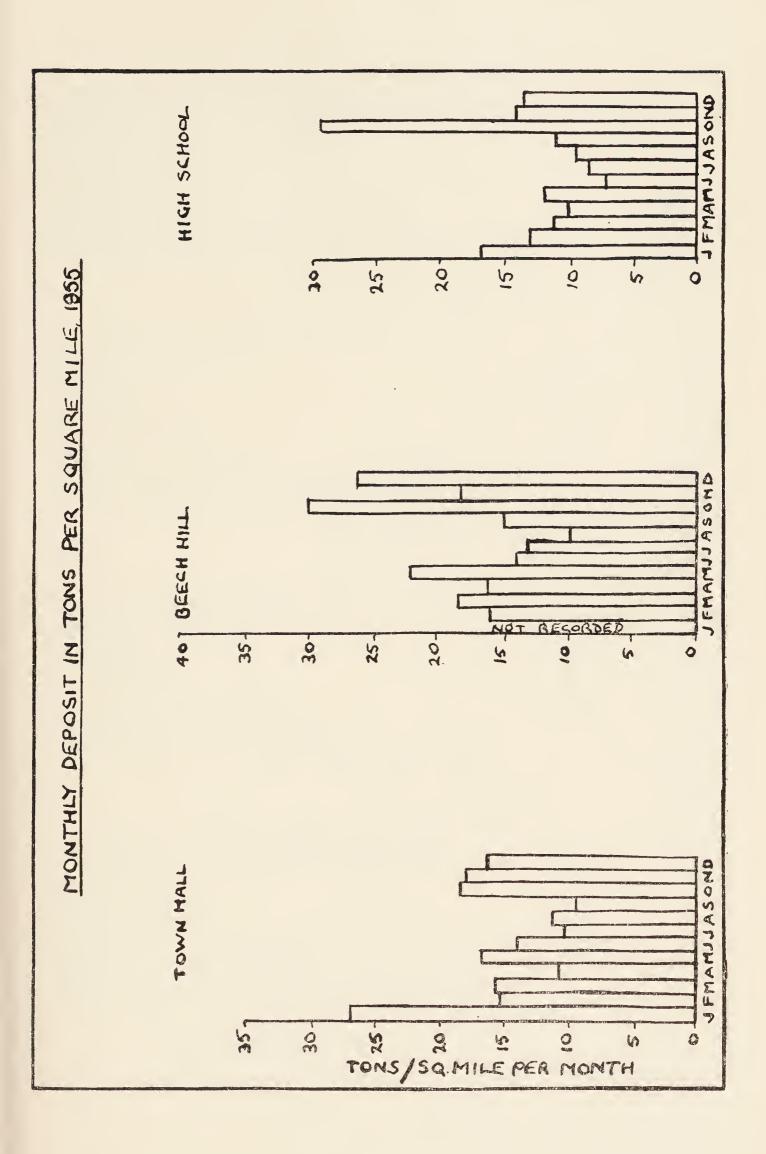
January 26·75 — 16·76 February 15·27 15·89 12·91 March 15·65 18·21 11·22 April 10·92 15·95 10·10 May 16·43 22·19 12·05 June 13·94 13·73 7·45 July 10·18 12·96 8·56 August 11·12 9·73 9·48 September 9·19 14·98 11·07 October 18·39 29·84 29·10 November 17·96 18·21 14·29			Town Hall	Beech Hill	Luton High School
December 15.83 26.15 13.50	February March April May June July August September October	 	 15·27 15·65 10·92 16·43 13·94 10·18 11·12 9·19 18·39	18·21 15·95 22·19 13·73 12·96 9·73 14·98 29·84	12·91 11·22 10·10 12·05 7·45 8·56 9·48 11·07 29·10

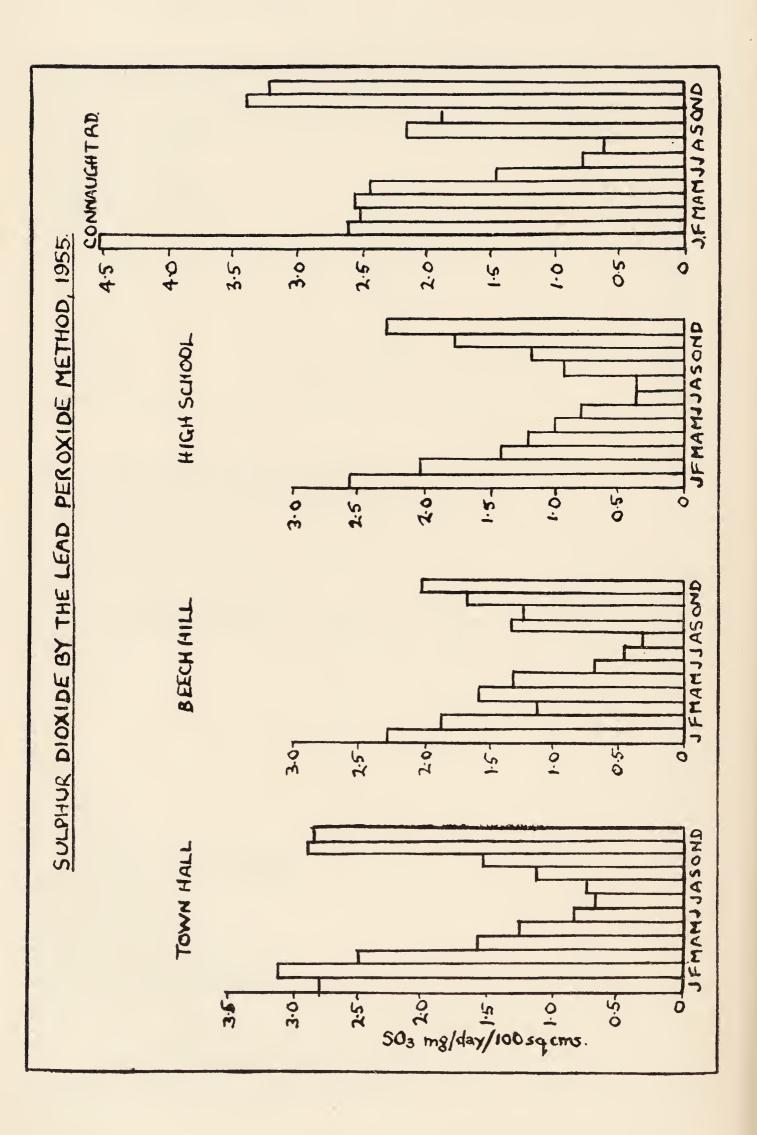
Sulphur Compounds by Lead Peroxide Method (milligrams SO₃/day/100 cm²) Jan.—Dec., 1955

				Town Hall	Beech Hill	Luton High School	Connaught Road
January				2.76	2.28	2.55	4.52
February				3.11	1.87	2.02	2.60
March	• • •	• • •		2.49	1.12	1.40	2.51
April		• • •		1.57	1.57	1.18	2.54
May	• • •	• • •		1.25	1.30	0.99	2.45
June	• • •	• • •		0.82	0.67	0.78	1.46
July			• • •	0.67	0.46	0.37	0.79
August				0.74	0.33	0.37	0.64
September		• • •		1.13	1.32	0.94	2.15
October	• • •	• • •		1.52	1.22	1.18	1.81
November		• • •	• • •	2.90	1.69	1.77	3.37
December		• • •		2.85	2.01	2.26	3.17
<u></u>				To the second se		41.0	

Summer Averages 1955.

	Town Hall	Beech Hill	Luton High School	Connaught Road
Deposited Matter (tons/sq. mile/month)	11.96	14.92	9.79	
${\rm Milligrams \ \ SO_3/day/100} \ {\rm cm^2. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	1.03	0.94	0.77	1.67





SCHOOL HEALTH SERVICE

LUTON COMMITTEE FOR EDUCATION

MEMBERS OF THE GENERAL PURPOSES SUB-COMMITTEE (as at end of 1955)

Mayor

COUNCILLOR E. K. HICKMAN

Chairman

COUNCILLOR G. C. SOUSTER

Alderman Mrs. B. Andrews	Councillor L. G. Bowles
Alderman G. L. Matthews	Councillor S. Gonshor
ALDERMAN MRS. K. M. MILNER, M.B.E., J.P.	Councillor C. J. Harris

ALDERMAN C. A. SINFIELD, J.P. COUNCILLOR H. S. LAMB

Councillor F. W. Bates, J.P. Councillor S. H. D. Law

COUNCILLOR F. BECKETT, B.E.M. COUNCILLOR H. G. LAWRENCE

Co-opted

Mr. J. Burgoyne Mr. E. J. Waller

County Council

COUNTY ALDERMAN H. G. BRIGHTMAN, J.P. COUNTY COUNCILLOR T. J. JONES

J. A. Corbett, B.A., Ph.D., Borough Education Officer

STAFF

Principal School Medical Officer R. M. DYKES, M.A., M.D., D.P.H.

Deputy Principal School Medical Officer

W. EDGAR,

M.B., Ch.B., D.P.H., D.C.H.

School Medical Officers
G. T. CROOK,
M.R.C.S., L.R.C.P., D.P.H.
WINIFRED M. HISCOCK

Part Time

L.R.C.S., L.R.C.P., D.P.H.

GWYNETH M. MACPHERSON, M.R.C.S., L.R.C.P.

SYLVIA MUNRO, M.R.C.S., L.R.C.P.

Ophthalmic Surgeon
W. HADDEN GORDON,
M.A., M.B., Ch.B., D.P.H., D.O.M.S.

Orthopaedic Surgeon
D. Levi,
M.S., F.R.C.S.

Dental Surgeons
Three Posts Vacant

Part Time

R. B. T. DINSDALE, L.D.S.

M. H. ROBINSON, L.D.S.

D. R. TAYLOR, L.D.S.

Orthoptist

MISS E. C. WILD (Part Time)
D.B.O.

Remedial Gymnast Masseur H. J. Godfrey (Part Time) C.S.M.M.G.

Speech Therapist
MISS C. M. COALES,
L.C.S.T.

Psychiatric Social Worker Mrs. C. M. Macdonald

Mrs. A. E. Langford, S.R.N., S.C.M., CERT. H.V.

Senior Clerk
MISS G. A. SHANE

BOROUGH OF LUTON

Committee for Education

63–69, Guildford Street,
LUTON,
February, 1956.

To the Chairman and Members of the Committee for Education.

Ladies and Gentlemen,

I have the honour to present the Annual Report on the School Health Service for the year 1955.

During the year there were several staff changes. On the 8th April, 1955, Dr. Margaret I. Hendrie took up the appointment of Senior Medical Officer for Maternity and Child Welfare in Hull, and on the 11th July, 1955, the vacancy was filled by the appointment of Dr. Winifred M. Hiscock.

The appointment on 19th September, 1955, of the first full-time dental officer since 1947 was, unfortunately, shortlived, as he soon elected to work as a part-time officer—the influence of his work, however, is mentioned in the report.

Owing to the increasing demands being made upon the Child Guidance Clinic the Committee for Education agreed to the appointment of a Psychiatric Social Worker, and on the 17th November, 1955, Mrs. C. M. Macdonald was appointed to this post.

The number of pupils on the school registers on 31st December, 1955, was 18,080, an increase of 518 over the previous year. It has been found necessary to continue employing general medical practitioners in a part-time capacity in order to maintain the required number of periodic medical inspections. These medical practitioners performed 58·7 per cent of the periodic medical inspections. It should be remembered that the permanent medical officers undertake duties in connection with general Public Health, Infectious Diseases, and Maternity and Child Welfare, in addition to the work of the School Health Service, and that the Authority has, in fact, the equivalent of only 1·88 full time medical officers employed in the School Health Service.

The general health of the children was again found to be satisfactory.

A report on the Skin Testing of Infant School Entrants is included in the section of the report dealing with Tuberculosis, and a report on an outbreak of Infective Hepatitis amongst the school children on the Farley Hill Estate is included in the Appendix.

It is fitting that I should express my indebtedness to the entire School Health Service Staff, and to the School Welfare Officers and Teachers in the service of the Authority, who have willingly contributed to the work of the School Health Service, and in particular to Dr. Edgar, to whom I am indebted for the preparation of this report.

I have the honour to be,
Your obedient servant,
R. M. DYKES,
Principal School Medical Officer

POPULATION AND DEPARTMENTS

The school population increased from 17,562 on the 31st December, 1954, to 18,080 on the 31st December, 1955. The number of pupils on the registers at 31st December, 1955, was as follows:—

Primary Schools	• • •	• • •	• • •	11,000
Secondary Schools	• • •	• • •	• • •	4,726
Grammar and Techni	ical S	chools	• • •	2,266
Special School	• • •	• • •		88

MEDICAL AND OTHER INSPECTIONS

(a) Medical

The annual inspections of school children were carried out in accordance with the provisions of the School Health Service and Handicapped Pupils Regulations, 1953, in which a minimum of three inspections is prescribed during the period of school life. It is left to the Authorities' discretion when to arrange these and also whether additional inspections are required. Infant School Entrants were examined at five years of age within their first year at school, junior pupils at 10 years of age in their last year at junior school, and senior pupils at 14 years of age during their last year at secondary modern school. At the Grammar and High Schools, 14-year-old pupils and all school leavers between the ages of 16–19 years were examined.

The number of inspection sessions averaged 9.5 per week during the actual school terms; 6,196 children were examined at Periodic Medical Inspections, 2,473 at Special Inspections and 1,473 at Re-inspections at the schools. In addition 2,194 Special Inspections and 2,923 Re-inspections were carried out at the School Clinic. Of the 6,196 children examined at Periodic Medical Inspections 1,264 (20.4 per cent) were found to have defects requiring treatment compared with 19.39 per cent in 1951, 17.68 per cent in 1952, 17.32 per cent in 1953, and 19.04 per cent in 1954.

This increase is due principally to the fact that vision testing of school entrants was recommenced during the year. From Table I (C) it can be seen that the number of pupils examined during 1955 who had visual defects was 872 (14·07 per cent), compared with 713 (12·83 per cent) in 1954. In addition colour vision testing of junior and senior pupils was commenced during the year.

Details of defects found are given in Table II (A) of the Medical Inspection Returns.

(b) Dental

The appointment of a full time dentist in September was shortlived. By November he had reduced his sessions to five per week. During this period, however, 727 fillings were completed compared with only 90 fillings in 1954, a good indication of the preventive work that could be undertaken if the dental officers were available.

Routine dental inspections at schools have not been possible since 1949. The principle of regarding the dental clinic as an emergency relief centre

is fundamentally unsound and runs counter to the conception of school dentistry as part of a carefully co-ordinated plan of regular supervision of the health of the school children. In this respect it is discouraging to have to report that the present Dental Service compares most unfavourably with that provided by the School Health Service 20 years ago, when 30 per cent of the school population received routine dental inspection, and with 1947, when 50.5 per cent of the children received routine dental inspection.

During the year no periodic dental inspections were possible. A total of 1,476 teeth were extracted and 727 fillings completed by the School Dental Officers. Further details are given in Table V of the Medical Inspection Returns.

(c) Cleanliness

In the Primary and Secondary Departments 44,869 inspections were carried out by the School Nurses, who paid approximately three visits to each school during the year. The number of children found to be verminous was 237 (1.45 per cent). This compares with 6.11 per cent in 1950, 5.13 per cent in 1951, 3.72 per cent in 1952 and 2.50 per cent in 1953. Details are given in Table III of Medical Inspection Returns.

GENERAL CONDITION OF THE CHILDREN INSPECTED

At the time of inspection the examining Medical Officer forms a general impression of the child's physical fitness and classifies him according to the following scale:—

A (Good) Those better than normal.

B (Fair) Those normal.

C (Poor) Those below normal.

Under the classification "C" are placed those children whose "general condition" or nutritional state is such that they should be kept under observation or treatment. The figures for the past five years are as follows:—

			A (Good)	B(Fair)	C(Poor)
			%	%	%
1951	• • •	• • •	42.327	55.113	2.558
1952	• • •	• • •	50.375	47.824	1.801
1953	• • •	• • •	61.015	37.598	1.387
1954	• • •	• • •	64.136	34.694	1.170
1955	• • •	• • •	61.7	36.9	1.4

Fuller details are given in Table II (B) of the Medical Inspection Returns.

It is interesting to note that this present system of classification was adopted in 1947, when it replaced a four grade system of A (Excellent), B (Normal), C (Slightly Sub-normal) and D (Bad). The present system is being replaced as from 1st January, 1956, by an even simpler system of the grades S (Satisfactory) and U (Unsatisfactory).

Attendance of Parents

The attendance and co-operation of parents at periodic medical inspection is most gratifying as shown in the following table, although the attendance in the third age group is less satisfactory. It is a common experience that many of the older children prefer not to be accompanied by the parent.

Entrants .	•••	• • •	• • •	• • •	93.3%
Second Age Gro	up	• • •	•••	• • •	81.7%
Third Age Grou	p	• • •	• • •	• • •	32.6%

WORK OF THE SCHOOL NURSING STAFF

The School Nurses carried out the following work during the year:—

1. Number of attendances at clinics:

	1. Numbe	er or	attenda	inces a	at CI	IIIIC	S:		
	Min	or A	ilment	•••	• •	•	• • •	• • •	469
	Spec	cial	• • •	•••	• •	•	•••	• • •	372
2.	Number	of	attend	ances	at	Sc	hool	Medical	
	Inspe	ectio	n	• • •	• •	•	•••	• • •	320
3.	Number	of vi	isits to	school	s fo	r:			
	(a)	Hea	d Inspe	ections	S:				
		Firs	t Visits		• •	•	• • •	• • •	251
		Re-i	inspecti	ons	• •	•	• • •	• • •	43
	(b)	Oth	er purp	oses	• •	•	• • •	• • •	301
4.	Number	of vi	sits to	Nurse	ry S	cho	ols	• • •	83

ARRANGEMENTS FOR TREATMENT

29

All the special clinics with the exception of the Child Guidance Clinic, are held at the School Clinic, Dallow Road, as follows:—

Minor Ailment—Medical Officers' Sessions—Monday, Wednesday, Friday, Saturday a.m.

Minor Ailment—Treatment Sessions—Daily.

Dental Clinic—Monday p.m., Tuesday a.m. and p.m.

Ophthalmic—Wednesday and Friday (15 sessions per month).

Orthoptic Treatment-Monday and Friday a.m. and p.m.

Orthopaedic—1 Ascertainment Session each month.

Orthopaedic Treatments—Monday and Thursday p.m.

Speech Therapy—2 Sessions daily.

5. Number of Home Visits

Medical Officers' Special Sessions for the examination of Physically Handicapped and Educationally Subnormal Children are held as required.

It is difficult to give an accurate estimate of the number of school children who made use of the facilities provided by the School Health Service during the year. The total of all pupils attending one of the clinics for the first time during 1955 is 4,687 (25.93%). This does not take account of those who have continued to attend from the previous year and the probability is that between 30 and 40 per cent of the school population are using the facilities provided by the School Health Service during any particular year.

Minor Ailments

The treatment of minor ailments is carried out at the School Clinic, Dallow Road. Six Minor Ailment dressing sessions and four Medical Officers' sessions are held each week.

In addition, special examinations of children referred from School Medical Inspections, and children referred by school nurses, teachers, welfare officers and parents are also undertaken at the clinic by the medical officers. The total number of attendances during the year, excluding those attending for dental care, was 13,044, of which 3,068 were primary visits.

The inspection and cleansing of children referred by the school nurses on account of head infestation are also performed at the School Clinic, where advice and help in the management of these children are given to the parent.

Eighteen cases of scabies were diagnosed and treated at the School Clinic compared with 8 cases in 1953, and 22 cases in 1954. Facilities for bathing and treatment are available at the Clinic.

For the fifth consecutive year no case of ringworm was confirmed.

Seventy-eight cases of impetigo were diagnosed and treated, compared with 52 cases in 1952, 35 cases in 1953 and 43 cases in 1954.

Visual Defects.

(1) Ophthalmic Clinic

Mr. W. Hadden Gordon, Consultant Ophthalmic Surgeon, conducted 15 sessions each month at the School Clinic.

				Exami	ned by
				Ophthalmi	c Surgeon
					Pre-school
				Children	Children
Total number of attendances	• • •	• • •	• • •	2,194	177
Number of new cases seen	• • •		• • •	409	49
Number of cases on roll at 31.1	2.55	• • •	• • •	983	45
Number of prescriptions issued	• • •	• • •	• • •	648	15
Number referred for operative	treati	nent/o	r in-		
vestigation	• • •	• • •	• • •	7	4

The percentage of pupils found to require treatment for defective vision at periodic medical inspections during the past four years was as follows:—

	1952	1953	1954	1955
Entrants		-		0.87%
Second Age Group	12.0%	11.7%	14.2%	13.19%
Third Age Group	14.8%	16.9%	21.2%	18.61%
Additional Periodic				
Inspections	20.2%	21.8%	21.3%	18.44%

The vision testing of 5 year old school entrants was re-commenced during the year. This is responsible for the increase in children requiring treatment or requiring to be kept under observation for visual defect, shown in Table II (A).

(2) Orthoptic Clinic

Miss E. C. Wild, Orthoptist to the Bedfordshire County Council, held four sessions weekly.

During the year 99 school, and 25 pre-school children referred by the Ophthalmic Surgeon were seen, and the conditions ascertained as follows:—

Convergent Strabismus	• • •	• • •	687
Divergent Strabismus	• • •	• • •	$\binom{68}{6}$ Amblyopia 18
Amblyopia	• • •	• • •	6
Heterophoria	• • •	• • •	26
No abnormality	• • •	• • •	18

School children made 810 attendances, and 78 attendances were made by pre-school children; 511 tests were performed on school and 55 on pre-school children.

Eighty children were discharged during the year as shown in the following table:—

Cured	• • •	• • •	• • •	19
Improved	• • •	• • •	• • •	16
No improvement		• • •	• • •	6
No abnormality	• • •	• • •	• • •	17
Left district	• • •	• • •	• • •	2
Unsuitable for tre	eatment	t	• • •	15
Failed to attend	• • •	• • •	• • •	5

Twenty-three children were on the waiting list for treatment on 31.12.55.

Orthopaedic Defects

Children found at periodic medical inspection or at the Minor Ailment Clinic to have some orthopaedic or postural defect were referred to the Orthopaedic Clinic.

Mr. D. Levi, Consultant Orthopaedic Surgeon, held ascertainment clinics on the first Wednesday of each month.

Mr. H. J. Godfrey, Remedial Gymnast Masseur, held three sessions weekly throughout the year.

Number of attendances at Ascertainment Clinics	• • •	• • •	275
Number of new cases during year	•••	• • •	71
Number of cases on register on 31.12.55	•••	• • •	121
Number of attendances at treatment sessions	•••	• • •	772

Particulars of the cases seen and the work undertaken are given below:—

DEFECTS	No. of Cases	No. of Attendances	No. for Exercises	No. for Appliances	No. for X-Ray	No. for Hospital	No. Discharged
Anterior Poliomyelitis Congenital Defects Everted Feet Inverted Feet Flat Feet Hallux Valgus Hammer Toes Knock Knees Perthes Disease Postural Defects Tight Hamstring Tendons Other Defects	3 10 5 2 9 3 3 54 1 27 10 43	13 22 9 4 13 5 4 71 2 40 20 72	- 1 - 2 1 - 2 - 13 3 3	$ \begin{array}{c c} 4 \\ 7 \\ 2 \\ \hline 1 \\ \hline 2 \\ \hline 1 \\ 3 \\ 2 \end{array} $	1 1 5 2 2		
Totals	170	275	25	22	11	11	49

In addition 121 attendances were made by 67 pre-school children referred by Medical Officers at the Child Welfare Centres and Day Nurseries.

Ear, Nose and Throat Defects

Children suffering from these defects were treated in the first instance at the Minor Ailment Clinic.

Only five children were referred by the School Medical Officers for operative treatment of tonsils and/or adenoids, compared with 35 children in 1953, and 11 in 1954.

During the year the number of children found at periodic and special inspections to require treatment for tonsils and/or adenoids has shown a considerable decrease—from 323 in 1953, to 218 in 1954, to 184 in 1955.

Physical Defects and Delicate Children

Forty-one sessions were held during the year for the examination of physically defective and delicate children, at which 29 new and 50 return cases were seen. Recommendations for special treatment were as follows:—

Home tuition	• • •	• • •	• • •	• • •	• • •	6
Provision of Transpor	t	• • •	• • •	• • •	• • •	14
Convalescent Home of	r Open-	Air Sc	hool	• • •	• • •	25

Backward and Difficult Children

During the year 163 sessions were held for the ascertainment of children referred on account of backwardness or behaviour problems. One hundred and sixteen new and 74 return cases were seen and appropriate recommendations regarding extra tuition at school, special educational treatment, further supervision or referral to the Child Guidance Clinic, were made in each case.

The number of children ascertained during the year as educationally subnormal was 12. The number of children reported during the year as ineducable under Section 57 (3) was 5, and one child was reported under Section 57 (5) of the Education Act, 1944, as requiring supervision after leaving school.

In 1954 two classes were commenced in Junior Schools to provide special educational treatment for pupils of normal intelligence who were educationally retarded because of missed schooling, e.g., repeated and long absence through illness, frequent change of school, etc. The size of the classes was restricted to 10 in order that the pupils might receive individual attention and rapidly attain the educational standard of which they were capable. These two classes have been continued successfully during 1955.

It has been necessary to choose these pupils with care as the classes are not designed for borderline educationally subnormal pupils.

Child Guidance

At the end of 1955 the staff consisted of a part-time Psychiatrist and a part-time Psychiatric Social Worker. As the Psychiatrist attends for only two sessions per week it was impossible for her to see all 41 children referred by the School Medical Officers and family doctors. She undertakes mainly diagnostic work, but in addition was able to undertake courses of treatment on a number of children and parents.

The referral of children from the magistrates in the Juvenile Courts requesting special reports upon the children has frequently interfered with the routine work of the clinic. During the year 13 children were referred from the Juvenile Courts, 7 from Luton and 6 from Bedfordshire. The number of attendances totalled 175.

Classification of New Cases:—				
Anxiety states	• • •	• • •	• • •	3
Behaviour problems	• • •	• • •	• • •	11
Delinquency	• • •	• • •	• • •	10
Educational difficulties	•••	• • •	• • •	2
Psychosomatic conditions	• • •	• • •	• • •	1
The results of treatment were as foll	.ows:—	_		
Discharged as improved	• • •	• • •	• • •	6
" to Heathwood	• • •		• • •	4
,, to School for Malad	ljusted		• • •	2
Removed from area	• • •	• • •	• • •	1
Still under treatment	• • •	• • •	• • •	12

Speech Defects

During the year 133 children were seen, of whom 90 were treated for the following conditions:—

Condition					Boys	Girls
Stammering	• • •	• • •	• • •	• • •	28	6
Articulatory	Defects	• • •	• • •	• • •	37	11
Cleft Palate	• • •	•••	• • •	• • •	1	2
Lip Reading	• • •	• • •	• • •	• • •	1	
Others	• • •	• • •	• • •	• • •	1	. 3
N.A.D	• • •	• • •	• • •	• • •	******	

Sixteen are still awaiting treatment and 43 were discharged during the year.

HANDICAPPED PUPILS

The early ascertainment of handicapped pupils is one of the most important functions of the School Health Service.

The Education Authority is responsible for the ascertainment of all handicapped children over the age of two years who require special educational treatment.

As a general principle, handicapped children attend ordinary schools provided they are able to profit by the education offered, and that they do not disturb other children by their presence.

Children are not removed from their homes to residential institutions unless it is considered they will clearly benefit from the transfer, or unless their presence in a day school is prejudicial to other children.

A few are ascertained in early infancy and referred to the School Health Service when they reach the age of two years. Some are ascertained at the first periodic medical inspection, others are referred by head teachers shortly after admission to school, and a number of pupils are brought to notice after illness or prolonged hospital treatment.

Details regarding the categories of handicapped pupils requiring special educational treatment are contained in the "School Health Service and Handicapped Pupils Regulations, 1953" as follows:—

(a) Blind Pupils

"Pupils who have no sight or whose sight is or is likely to become so defective that they require education by methods not involving the use of sight."

Number of blind pupils ascertained during the year	1
Number of blind pupils admitted to Special School during the year	Nil
Total number of blind pupils in Special Schools for the Blind, as at 1.12.55	Nil

(b) Partially Sighted Pupils

"Pupils who by reason of defective vision cannot follow the normal regime of ordinary schools without detriment to their sight or to their educational development but can be educated by special methods involving the use of sight."

Number of	partially	sighted	pupils	ascert	ained	during	the	
year	•••	• • •	•••	• • •	• • •	•••	• • •	Nil
Number of	partially	sighted	l pupil	s adm	itted	to Spe	cial	
Schools	during th	ne year	•••	• • •	• • •	•••	•••	Nil
Total number	er of part	ially sig	hted pu	pils in	Spec	ial Scho	ools	
for part	ially Sigh	ted Chi	ldren as	at 1.1	$2.\overline{5}5$	• • •	• • •	4

(c) Deaf Pupils

"Pupils who have no hearing or whose hearing is so defective that they require education by methods used for deaf pupils without naturally acquired speech or language."

Number of deaf pupils admitted to Special Schools during the year	Nil
Total number of pupils in Special Schools for the Deaf, as at 1.12.55	6

(d) Partially Deaf Pupils

"Pupils who have some naturally acquired speech and language but whose hearing is so defective that they require for their education special arrangements or facilities though not necessarily all the educational methods used for deaf pupils."

Number of partially deaf pupils ascertained during the year	Nil
Number of partially deaf pupils admitted to Special Schools	
during the year	Nil
Total number of pupils in Special Schools for Partially	
Deaf Children, as at 1.12.55	Nil

(e) Educationally Sub-Normal Pupils

"Pupils who, by reason of limited ability or other conditions resulting in educational retardation, require some specialised form of education, wholly or partly in substitution for the education normally given in ordinary schools."

After ascertainment, educationally subnormal pupils are admitted to Osborne Road School, a Day School which provides 90 places for these pupils. If educational subnormality is accompanied by evidence of maladjustment such pupils are admitted to the Residential Special School at Gaddesden.

Number of Educationally Subnormal Children ascertained	
during the year	12
Number of Educationally Subnormal Children admitted	
to Osborne Road Special School during the year	11
Total number of children on register at Osborne Road	
Special School at 31.12.55	88

(f) Epileptic Pupils

"Pupils who by reason of epilepsy cannot be educated under the normal regime of ordinary schools without detriment to themselves or other pupils."

Number of epileptic pupils ascertained during the year	1
Number of epileptic pupils admitted to Special Schools during the year	1
Total number of epileptic pupils in Special Schools for	
Epileptic Pupils as at 1.12.55	3

(g) Maladjusted Pupils

"Pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment in order to effect their personal, social or educational readjustment."

Number of maladjusted pupils ascertained during the year	8
Number of maladjusted pupils admitted to Special Schools,	
etc., for Maladjusted Children during the year	9
Total number of maladjusted pupils in Special Schools,	22
Hostels, etc., as at 1.12.55	

(h) Physically Handicapped Pupils

"Pupils not suffering solely from a defect of sight or hearing who by reason of disease or crippling defect cannot, without detriment to their health or educational development, be satisfactorily educated under the normal regime of ordinary schools."

Number of physically handicapped pupils ascertained during	•
the year	4
Number of physically handicapped pupils admitted to	
Residential Special Schools during the year	5
Total number of physically handicapped pupils in Residential	
Special Schools as at 1.12.55	11

(i) Pupils Suffering from Speech Defect

"Pupils who on account of defect or lack of speech not due to deafness, require special educational treatment."

Number of pupils with speech defect ascertained during	
the year	Nil
Number of pupils with speech defect admitted to Special	
Schools during the year	Nil
Total number of children with speech defect in Special	
Schools as at 1 12 55	1

(j) Delicate Pupils

"Pupils not falling under any other category who by reason of impaired physical condition need a change of environment or cannot, without risk to their

health or educational development, be educated under the normal regime of ordinary schools."

Number of delicate pupils ascertained during the year	25
Number of delicate pupils admitted to Special Open Air	
Schools during the year	26
Total number of delicate pupils in Residential Open Air	
schools as at 1.12.55	18

CEREBRAL PALSY

The great majority of children with cerebral palsy are handicapped from birth. The condition is due to damage or imperfect development of the brain and the characteristic feature of this handicap is spasticity or inco-ordination of certain muscles, e.g. those affecting one or more limbs, or those which are responsible for the production of speech.

These children present individual problems and the more severely handicapped require a great deal of time, patience and understanding if a true assessment is to be made.

At the end of the year twenty-eight children with cerebral palsy were known to the School Health Service. Twelve were predominantly spastic, 7 athetoid and 9 hemiplegic. The age distribution is as follows:—

Age in Years	1	2	3	4	5	6	7	8	9	10	11		13		15	Total
Boys	1	1	1		2	2	2	1	2	2	1	3	_	3	_	21
Girls		-	2	2	1	-	-	1	-	1	-	-	_	-	-	7

Of the 20 children who are of school age, 14 (70 per cent) are receiving education in ordinary schools, two attend Osborne Road School, three are in Residential Schools for Physically Handicapped Pupils, and one is receiving home tuition.

The incidence of cerebral palsy amongst the school population (5·15 years) is $1\cdot10$ per thousand, and amongst the pre-school population (0·5 years) is $1\cdot77$ per thousand.

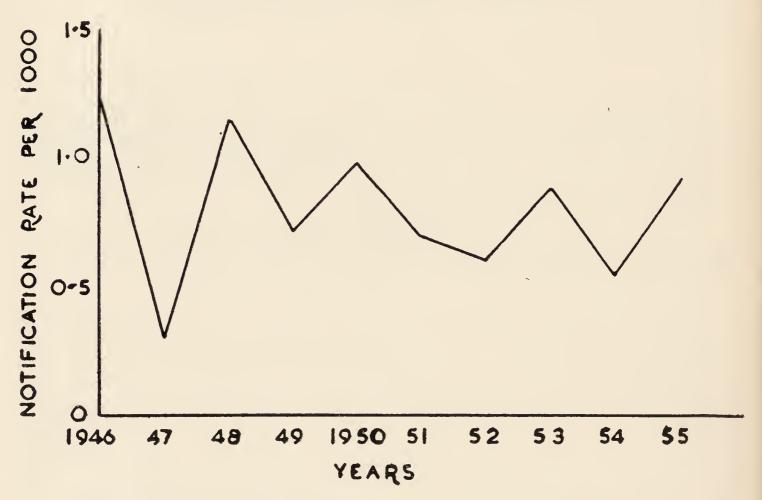
DIPHTHERIA IMMUNISATION

The arrangements for diphtheria immunisation of school children were continued as in previous years. Children who had not received any previous protection were immunised at the School Clinic and children who required only a reinforcing injection were immunised at school. The infant departments of all schools were visited in June and December for the purpose of diphtheria immunisation. During the year 145 primary and 985 reinforcing injections were given and at the end of the year 80·4 per cent of the school population were known to be immunised. This compares with 68 per cent in 1951, 75·5 per cent in 1952, 77·6 per cent in 1953, and 80·3 per cent in 1954.

TUBERCULOSIS

In recent years there has been a marked decrease in the number of deaths from tuberculosis in school children but, as the accompanying graph illustrates, the morbidity rate in the school population does not show a similar trend.

PULMONARY TUBERCUL OSIS IN SCHOOL CHILDREN 1946-1955



The continuing high notification rate may be attributable in part to improved case finding methods and contact tracing techniques. During 1955, 26 cases were notified, of whom three were discovered as the result of mass miniature radiography of school children aged 14 years and over. The age distribution of the cases notified during 1955 was as follows:—

Age (Years)	5	6	7	8	9	10	11	12	13	14	15	16	Total
Boys (No.)	1		1	-		1	1	1	1	1	2	1	10
Girls (No.)	1	1	1	-	_	_	_	1	•	_	1	1	6

There are, therefore, no grounds for complacency and it is considered appropriate at this stage to review the measures that are adopted in Luton to lessen the risk to school children of infection from tuberculosis.

(1) The compulsory X-ray examination of teachers before they enter the teaching profession—this is in conformity with the Ministry of Education Circular No. 149, 1952.

In addition, school caretakers are X-rayed before being appointed. During the year one caretaker suffering from active tuberculosis was detected by this means.

(2) The periodic X-ray examination of school teachers and school leavers when the services of the Mass Miniature Radiography Unit are available in Luton.

A report on the visit of this Unit during 1955 is contained elsewhere in this report. Two School leavers were found to have radiological evidence of active tuberculosis although neither had a positive sputum, and a third pupil was later found to have signs of activity.

(3) The examination of contacts of teachers and pupils found to have the disease.

All three pupils above were attending different schools and X-ray examination of contacts at school and at home were carried out. The sources of infection were not discovered.

- (4) Strict standards of cure are laid down by the Ministry of Education in Memorandum No. 286, 1948, which teachers who are found to be suffering from active pulmonary tuberculosis must satisfy before they are allowed to return to teaching.
- (5) The supervision of school milk supplies.

All milk supplied to schools is pasteurised milk supplied from approved dairies. Samples are taken periodically to ensure that the milk is safe and satisfactory.

(6) Tuberculin testing of school entrants.

The primary purpose of this test is to trace active disease amongst family contacts of children who show a positive reaction, but it may also assist in the detection of early infection in children themselves.

Tuberculin testing of school entrants was introduced in Luton in 1955.

The Chest Physician advised the use of the Heaf Multiple Puncture test for two reasons. First, because the technique is standardised and does not vary with different medical officers, and secondly, because the number of 'doubtful positives' is reduced to a minimum.

The scheme was carried out as part of the medical inspection of infant school entrants. Of the 1,852 pupils examined 1,325 (71.6 per cent) were tuberculin-tested. Of the remaining 527 children, there were 410 refusals and 117 who failed to return the consent form. Of the 1,325 children who were tested, only 21 (1.6 per cent) gave a positive reaction and of this number nine were already known to the Chest Clinic, seven of them having received B.C.G. vaccine. The remaining twelve children and, in addition, 31 contacts relating to them, attended the Chest Clinic for examination but none was found to have active tuberculosis.

Since only 71.6 per cent of the children were tuberculin-tested the figure of 1.6 per cent cannot be regarded as an exact index of the tuberculin positive incidence in the infant school population. The proportion of positive reactors in the remaining 28.4 per cent might have been either greater or less than this figure. In addition, an acceptance rate higher than 71.6 per cent is necessary to ensure complete tracing of contacts. At the moment we can only say that since the scheme did not bring to light any case of tuberculosis not hitherto

known to the Chest Clinic, the ascertainment of cases of infective tuberculosis would appear to be high.

The acceptance rate for the tuberculin test, however, could not be said to be satisfactory and it has been decided to continue the scheme during 1956 and to make every effort to achieve a better response.

INFECTIOUS DISEASES

The number of confirmed cases of Infectious Disease in school children during the year is shown in the following table:—

Scarlet Fever	• • •	• • •	• • •	40
Whooping Cough	• • •	• • •	• • •	41
Measles	• • •	• • •	• • •	597
Cerebro-Spinal Fever	• • •	• • •	• • •	
Acute Poliomyelitis—				
Paralytic	• • •	• • •	• • •	2
Non-paralytic	• • •	• • •		
Dysentery	• • •	• • •	• • •	3
Food Poisoning	• • •	• • •	• • •	1
Infective Hepatitis	• • •	• • •	• • •	32
Meningococcal Infection		• • •	• • •	2
-				

The large number of notifications of measles marked the onset of an epidemic in the later months of the year which will continue during the early months of 1956.

The occurrence of a large number of cases of Infective Hepatitis is dealt with in the special report in the Appendix.

NURSERY SCHOOLS AND NURSERY CLASSES

The two Nursery Schools, Dallow Road and Hart Hill, provided 165 places for children aged 2–5 years. The Nursery Classes at Beechwood Infants' School provided a further 60 places for children aged 3–5 years.

The Nursery Schools and Classes are visited regularly by school nurses and the children are examined at least twice each term by a Medical Officer.

PROVISION OF MEALS AND MILK IN SCHOOLS

In July, 1955, the Manor Road Central Kitchen, which had been an unsatisfactory feature of the School Meals Service, was closed down and additional school kitchens were built to replace the Central Kitchen.

The general arrangements for the provision of meals for dining centres are as follows:—

From Surrey Street School Kitchen to— Surrey Street and Hitchen Road Schools

From Stopsley C.S. School Kitchen to— Stopsley C.S. and Stopsley C.P. Junior and Infants' Schools. From Challney C.S. School Kitchen to—

Challney C.S., Denbigh Road Schools and Maidenhall Annexe.

From Icknield C.S. School Kitchen to—

Icknield, Limbury Infants', Norton Road Junior, Old Bedford Road, Chapel-Langley C.S. and Osborne Road Schools, and Technical School Annexe.

From Maidenhall C.P. School Kitchen to—

Maidenhall C.P. Primary and Dunstable Road C.P. Junior and Infants' Schools.

From Hart Hill Junior School Kitchen to— Hart Hill and St. Matthew's Schools.

Self-contained kitchen-dining rooms are now established at the following schools:—

Farley Beechwood Nursery Luton Technical Dallow Nursery Leagrave Junior Beech Hill C.S. Leagrave Infants' Hart Hill Nursery William Austin Beechwood* Luton Grammar Ramridge C.P. Luton High† wings

* Opening in January 1956 Whipperley

† New and larger kitchen in course of erection

Tennyson Road Kitchen-dining room serves not only pupils from Tennyson Road but also from Christ Church Junior and Infants' and Queen Square Junior Boys'; arrangement are made for the conveyance to and from this School Kitchen of pupils attending the latter schools.

During the financial year 1954-55, 1,338,046 meals were served to scholars, including 39,232 free meals and 133,652 meals supplied to teaching and canteen staffs. The following statistics have been submitted to the Ministry of Education in connection with the provision of meals and milk:—

	October	October
	1954	1955
Number of children in attendance at school	16,098	17,187
Number of children receiving meals in pay-		
ment	6,173	7,184
Number of children receiving free meals	191	147
Number of children receiving free milk	12,918	13,040
Percentage of children receiving meals	39.53	42.65
Percentage of children receiving milk	80.37	75.87

The permitted daily quantity of milk allowed for school children has remained at one-third of a pint throughout the year, except in the case of scholars at Nursery Schools, who are allowed two-thirds of a pint of milk per day.

CO-OPERATION OF TEACHERS AND SCHOOL WELFARE OFFICERS

The efficient conduct of the School Health Service depends in large measure on the close co-operation of doctors and nurses with the teachers and children in the schools. In this way teachers are encouraged to bring to the notice of the School Medical Officer children whose general condition, behaviour, lack of progress in school, etc., indicates the need for medical advice.

The co-operation of teachers and others connected with the welfare of children has been greatly appreciated.

EMPLOYMENT OF CHILDREN

Before or within 14 days from the date when a child begins employment he must be medically examined to ensure that the employment will not be prejudicial to his health or physical development, and that it will not render him unfit to obtain proper benefit from his education. Re-examination every six months is required during the course of employment.

Number of children examined by School Medica	al Offic	cer
and passed	• • •	374
Number of children re-examined by School Medica	al Offic	cer
and passed	• • •	134
Number of children examined by School Medica	al Offic	cer
and refused certificates	• • •	•••
Total	• •	508

Number of children employed during 1955 was 428, and the nature of the employment was as follows:—

Newspaper deliveries	•••	•••	• • •	• • •	•••	229
Errand Boys, Shop Assis	stants, e	etc.				149

It is interesting to record that there has been a progressive fall in the number of children seeking employment, in spite of the increasing number of school children. In 1950, 621 children (3.9 per cent.) were employed, in 1952, 547 children (3.2 per cent.), and in 1955, 378 children (2.09 per cent.).

The number of children examined under the Children's and Young Persons' Act, 1933, in connection with employment of children in entertainment was as follows:—

Employment in pantomimes and concert parties ... 13

MEDICAL EXAMINATION OF TEACHERS AND ENTRANTS TO TRAINING COLLEGES

The Ministry of Education Circular 249, 1952, requires that all candidates applying for admission to training colleges and university departments of education, and all entrants to the teaching profession, be medically examined. An X-ray examination of the chest is also compulsory for those entering the teaching profession. During the year 71 examinations were made in accordance with the provisions of the above circular and X-ray examinations were arranged where necessary.

MEDICAL INSPECTION RETURNS

(A) Periodic Medical Inspections

Table I

Entrants	• • •	• • •	1,852
Second Age Group	• • •	• • •	1,789
Third Age Group	• • •	• • •	1,373
	• • •	• • •	5,014
Additional Periodic Inspection	s	• • •	1,182
Grand Total	• • •	• • •	6,196
(B) OTHER INSP	ECTIO	NS	
Special Inspections	• • •	•••	4,667
Re-inspections	• • •	•••	4,396
Total	• • •	• • •	9,063

(C) Pupils Found to Require Treatment
Individual Pupils found at Periodic Medical Inspection to require
treatment (excluding Dental Diseases and Infestation with Vermin).

Group (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Table IIA	Total individual pupils (4)
Entrants	162	195	315
Second Age Group	236	109	338
Third Age Group	256	91	331
Total (prescribed groups)	654	395	984
Additional Periodic In- spections	218	79	280
Grand Total	872	474	1,264

Table II (A)
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE
YEAR ENDED 31ST DECEMBER, 1955

	PERIODIC SPECIAL INSPECTIONS INSPECTIONS							
			of Defects	No. of Defects				
Defect Code No.	Defect or Disease (1)	Requiring treatment	*Requiring to be kept Sounder observation but not requiring treatment	&Requiring treatment	Requiring to be kept Gunder observation but not requiring treatment			
4	Skin	49	12	444	_			
5	Eyes—(a) Vision	872	639	153	84			
	(b) Squint	72	5	4	_			
	(c) Other	36	9	155	2			
6	Ears—(a) Hearing	7	45	12	, —			
	(b) Otitis Media	10	22	63				
	(c) Other	2	8	35	3			
7	Nose or Throat	87	241	97	4			
8	Speech	28	42	20	4			
9	Cervical Glands		118	1	1			
10	Heart and Circulation	<u>'</u>	22	2	1			
11	Lungs	5	55	14	2			
12	Developmental— (a) Hernia	4	5	1	_			
	(b) Other	6	79	1				
13	Orthopaedic— (a) Posture	57	85	_	_			
	(b) Flat foot	36	53	4	1			
	(c) Other	74	74	76	5			
14	Nervous system— (a) Epilepsy	1	4	1	_			
	(b) Other	2	6	4	2			
15	Psychological— (a) Development	1	13	4				
	(b) Stability	5	47	15	2			
16	Other	22	150	743	43			

Table II (B)

CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED

DURING THE YEAR IN THE AGE GROUPS

Age Groups	No. of Pupils	A (Good)		B (Fair)		C (Poor)	
	Inspected	No.	% of Col. 2	No.	% of Col. 2	No.	% of Col 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	1,852	1,179	63.6	628	34.0	45	2.4
Second Age Group	1,789	1,037	57.9	734	41.1	18	1.0
Third Age Group	1,373	889	64.7	479	35.0	5	0.3
Additional Periodic Inspections	1,182	714	60.4	452	38.2	16	1.4
TOTAL	6,196	3,819	61.7	2,293	36.9	84	1.4

Table III

Infestation with Vermin

(i)	Total number of examinations in the schools by the school	
` '	nurses or other authorised persons	44,494
(ii)	Total number of individual pupils found to be infested	283
(iii)	Number of individual pupils in respect of whom cleansing	
	notices were issued (Section 54(2), Education Act, 1944)	104
(iv)	Number of individual pupils in respect of whom cleansing	
	orders were issued (Section 54(3), Education Act, 1944)	

Table IV

GROUP 1.—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table III)

			Number of cases treated or under treatment during the year		
			By the Authority Otherwise		
Ringworm— (i) Scalp	• • •	• • •	<u>—</u>		
(ii) Body	• • •	• • •			
Scabies	• • •	• • •	18	g	
Impetigo	• • •	• • •	70		
Other skin diseases	• • •	• • •	90		
Total	• • •	•••	178		

GROUP 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with		
	By the Authority Otherwise		
External and other, excluding errors of refraction and squint	204	_	
Errors of refraction (including squint)	1,392	_	
Total	1,596		
Number of pupils for whom spectacles			
were— (a) Prescribed	648		
(b) Obtained	Not known		
Тотаь	. 648	_	

GROUP 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated		
	By the Authority Otherwise		
Received operative treatment— (a) for diseases of the ear	_	1	
(b) for adenoids and chronic tonsillitis	<u> </u>	515	
(c) for other nose and throat conditions		_	
Received other forms of treatment	122	_	
Total	122	516	

GROUP 4.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases treated		
	By the Authority	Otherwise	
(a) Number treated as in-patients in hospitals		11	
(b) Number treated otherwise, e.g., in clinics or out-patient departments	170	1	

GROUP 5.—CHILD GUIDANCE TREATMENT

	Number of cases	treated
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinics	27	

GROUP 6.—SPEECH THERAPY

	Number of cases treated			
	By the Authority	Otherwise		
Number of pupils treated by Speech Therapist	149			

GROUP 7.—OTHER TREATMENT

		Number of cases treated				
		By the Authority	Otherwise			
(a) Miscellaneous Minor Ailments	•••	1,806				
(b) Other than above— (1) Orthoptic Treatment	•••	42				
Total	•••	1,843				

Table V

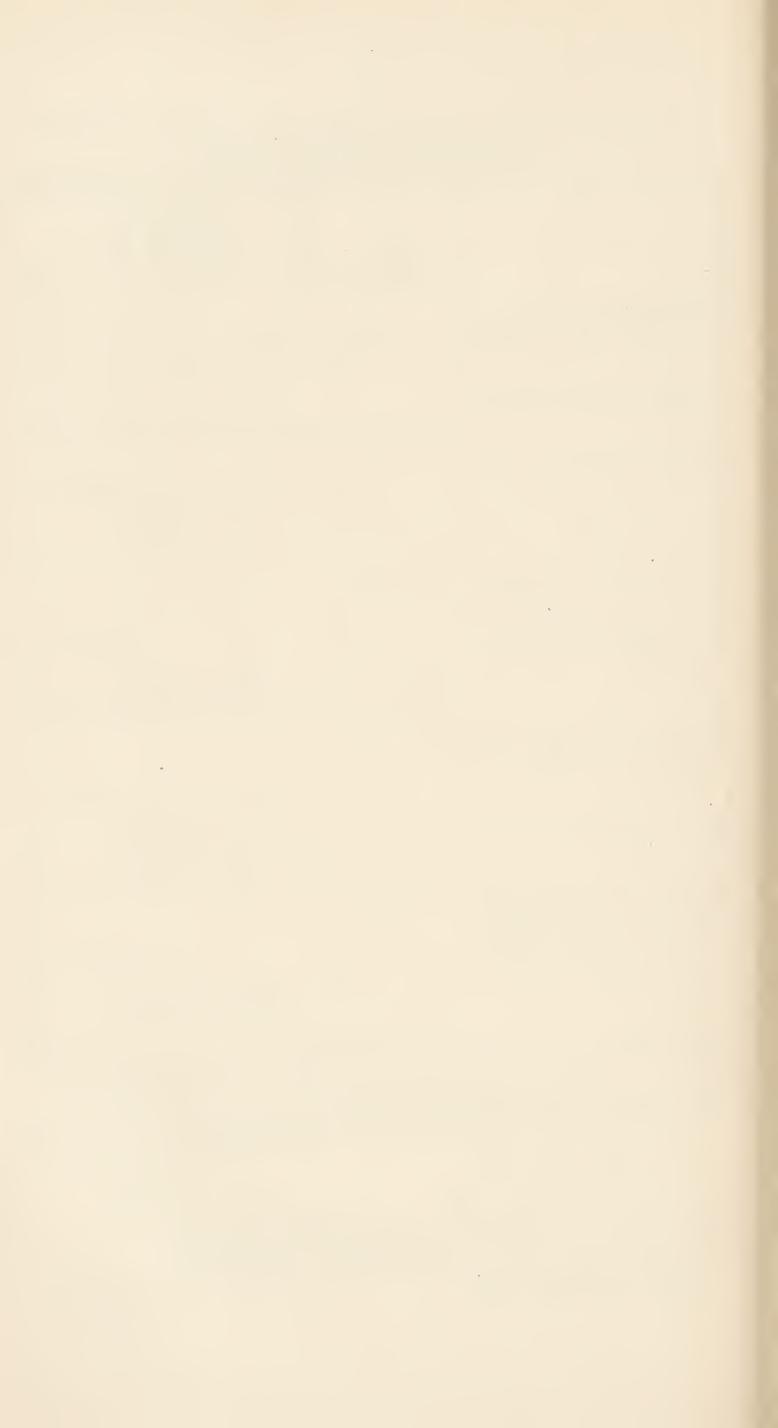
DENTAL INSPECTION AND TREATMENT

(1)	Number of pupils insp		by the	Autl	hority's	Dental	Offi	cers—
	(a) Periodic(b) Specials	• • •	• • •	• • •	• • •	• • •	•••	1,619
		To	tal (1)	• • •	•••	•••	• • •	1,619
(2)	Number found to requir	e treat	ment	• • •	• • •	•••	• • •	1,604
(3)	Number referred for trea	atment	·	• • •	• • •	• • •	• • •	1,525
(4)	Number actually treated	• • •	• • •	• • •	• • •	• • •	• • •	1,468
(5)	Attendances made by pu	pils fo	r treatm	ent	• • •	• • •	• • •	2,130
(6)	Half-days devoted to—							
	Inspection	• • •	•••	•••	• • •	• • •	• • •	6
	Treatment	•••	•••	• • •	• • •	•••	• • •	235
		r	Γotal (6)	•••	•••	•••	•••	241
(7)	Fillings—					,		
` ,	Permanent Teeth	• • •	• • •	• • •	• • •	• • •	• • •	491
	Temporary Teeth	•••	• • •	• • •	• • •	• • •	• • •	236
		Г	Total (7)	• • •	• • •	• • •	•••	727
(8)	Number of teeth filled—	•						
` ,	Permanent Teeth		• • •	• • •	• • •	• • •	• • •	429
	Temporary Teeth	• • •	• • •	• • •	• • •	• • •	•••	198
		Γ	Cotal (8)	•••	•••	•••	•••	627
(9)	Extractions—							
()	Permanent Teeth	• • •	• • •	• • •	* * •	•••	• • •	406
	Temporary Teeth	• • •	• • •	• • •	• • •	• • •	• • •	1,070
		Т	otal (9)	•••	* * *	•••	•••	1,476
(10)	Administration of general	lanaes	sthetics f	for ex	traction	• • •	• • •	1,046
	Other operations—							
(/	Permanent Teeth	• • •	• • •	• • •	• • •	• • •	•••	1,165
	Temporary Teeth		• • •		• • •	• • •		158
		То	otal (11)	• • •	•••	•••	•••	1,323

Handicapped Pupils Requiring Education at Special Schools or Boarding in Boarding Schools

	1	2	3	4	5	6	7	8	9	10
	Blind	Partially Sighted	Deaf	Partially Deaf	Delicate	Physically Handicapped	Educationally Subnormal	Maladjusted	Epileptic	Total
In the calendar year, 1955— A Handicapped Pupils newly placed in Special Schools or Boarding Homes	_		_		26	5	11	9	1	52
B Handicapped Pupils newly ascer- tained as requiring education at Special Schools or boarding in Homes	_1			_	25	4	12	8	1	50
On or about 31.1.56— C Number of Handicapped Pupils from the area—										,
(i) attending Special Schools as— (a) Day Pupils							88			88
(a) Day Pupils (b) Boarding Pupils		4	6	_	17	10	8	6	3	54
(ii) attending Independent Schools under arrangements made by het Authority					1	1	2	11	_	15
(iii) boarded in Homes and not already included under (i) or (ii)		_		-	_	_	—	5	-	5
TOTAL C		4	6		18	11	98	22	3	162
D Number of Handicapped Pupils being educated under arrange- ments made under Section 56 of the Education Act, 1944—							0			, i
(i) in hospital	<u> </u>	-	_	_	<u> </u>	_	_	_	_	_
(ii) in other groups (e.g., units for spastics)				_		_	_	_	_	·
(iii) at home		_				_5			1	6
E Number of Handicapped Pupils from the area requiring places in Special Schools (including any such children who are temporarily receiving home tuition or whose parents have not yet consented to their attending a Special School)—										
(i) Day	-	-	_	_	—	_	-	_	-	-
(ii) Boarding		-	1		1	2	3	4	AND A STATE	11

Number of children reported during the year as ineducable requiring supervision after leaving school—	or		
(a) Under Section 57(3) (excluding any returned under (b))	• • •		5
(b) Under Section 57(4)	• • •		
(c) Under Section 57(5) of the Education Act, 1944.	• • •		1
Amount spent on arrangements under Section 56 of the Education Act, 1944, for the education of handicapped pupils otherwise than at school, in the financial year			
ended 31st March, 1955 £	367	14	8

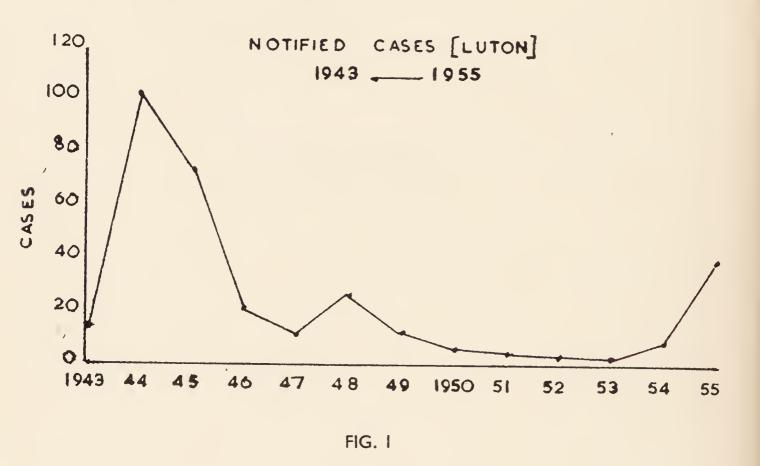


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APPENDIX	
	a

INFECTIVE HEPATITIS

Under the Jaundice Regulations of 1943, infective hepatitis (also known as catarrhal jaundice) is a notifiable disease in counties of the Eastern Region, including Bedfordshire. The incidence in Luton has fallen markedly since 1944 when more than one hundred cases were notified. The number notified in 1955 was 41, which can be seen from Fig. 1 to be the highest since 1945.

The number of notified cases of the commoner infectious illnesses represents only a percentage of their total incidence and a certain amount of caution should be exercised when comparing the incidence of one year with that of another. The notification of infective hepatitis, because it is restricted to one region of the country, is probably even less complete than that of other infectious diseases which are notifiable throughout England and Wales.



From time to time, therefore, medical practitioners in Luton have been reminded of their requirement to notify cases of jaundice, the most recent occasion being in June, 1955.

In February, 1955, a medical practitioner informed the Department that he had recently diagnosed several cases of infective jaundice on the new housing estate at Farley Hill. It was felt that these cases should be visited to confirm that they were infective hepatitis, and to discover, if possible, the source of infection. The enquiry, which was limited to the Farley Hill Estate, proved to be retrospective in the first instance, for while nine recent cases were discovered during the month of February, there came to light a number of cases which had occurred in the preceding months.

Enquiry was made at the infant and junior schools on the estate about the absence of pupils from school. A follow-up revealed not only recent cases with clinical jaundice but also convalescent and recovered cases. The graph in Fig. 2 does not necessarily give an accurate picture of the incidence of

INCIDENCE ON ESTATE SEPT. 1954 — AUG. 1955

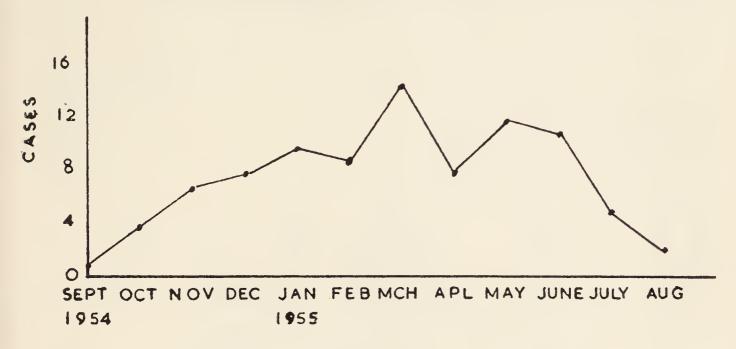
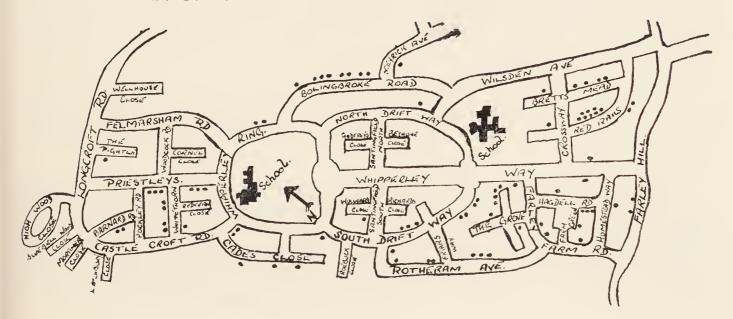


FIG. 2

hepatitis on the estate, but merely illustrates month by month the onset of discovered cases: nor can it be assumed that the epidemic subsided in August, for in July the schools closed and the further follow-up of cases became impracticable. In addition, the apparent rising incidence from September, 1954, to January, 1955, could be due in part to the difficulty that arose in definitely establishing a history of infection in the earlier months. Only cases that showed or gave a definite history of clinical jaundice are included in the graph.

During the twelve month period, 1st September, 1954 to 31st August, 1955, 92 cases of infective hepatitis were discovered on the estate, 86 of whom were normally resident there and of this number, seven cases, less than 10%, were notified.

PLAN OF ESTATE SHOWING DISTRIBUTION OF CASES



The estimated population of the Farley Hill Estate is approximately 6,650 comprising 1,300 pre-school children, 1,750 school children at 5–15 years and 3,600 persons over 15 years. The incidence of cases of jaundice was, therefore, approximately 13 per 1,000 of the estate population.

SEX AND AGE INCIDENCE



Fig. 3 shows the infection to be mainly one of childhood, more particularly at 6–11 years and distributed almost equally between the sexes. The total number of cases in the 5–15 age period was 75, an incidence of 43 per 1,000 pupils.

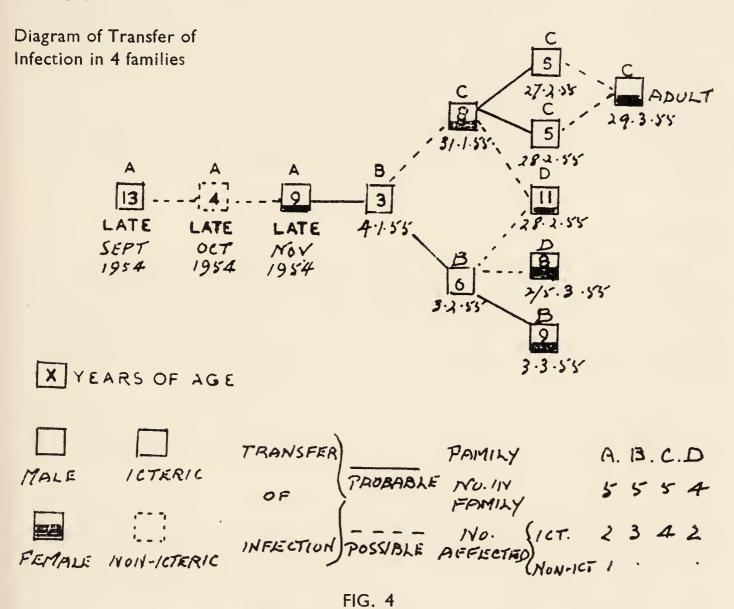
Infective hepatitis is a virus infection with an incubation period of about 30 days. In the northern hemisphere the incidence rises from October to reach a peak in the winter months. In this enquiry the outbreak had an apparent maximum incidence in March and might, on that account, be said to be out of season: but since the illness was chiefly one of children of school age and opportunity for the spread of infection greater during school term, season of the year may not be of great importance.

The exact mode of spread of infection is not known. It can be said, however, that no evidence was obtained in this enquiry of spread by water, food or milk. So far as could be determined it was essentially person to person transfer.

This was clearly demonstrated in four families in one area of the estate (Fig. 4). These families were closely associated, inasmuch as the children frequently visited each others homes. The possible chain of infection is illustrated, but it should be noted that for some of the children other possible sources of infection could not be entirely ruled out. All the children of the four families were infected, including one presumptive case who did not

become jaundiced. In only one of the families (C) was a parent infected, apparently by one of her two younger children.

The leisurely progress of the disease through the four families over a period of six months is characteristic. It is the unhurried spread coupled with the benign form that the illness usually takes that makes it, from the lay or even medical point of view, unexciting. Were it to assume a more explosive character or be more severe in its clinical form, interest would be immediately aroused.



Of the 92 identified cases, nine were adults, six of whom were teachers in the schools concerned and not resident on the estate. The remaining 86 cases represented 60 families, an average of 1.4 cases per family. In this connection it should be pointed out that the estate houses a population which is younger than Luton as a whole: for whereas the ratio of children in the 0–15 years age group to the estate population is 1:2.2, the comparable ratio for Luton is 1:4.2. Not only was the incidence of infection, therefore, likely to be higher on the estate than in other parts of the town, but person to spread within the family more able to play a prominent part.

The estimated number of pre-school children on the estate is 1,300 as against a school population at 5–15 years of 1,750. In the former group there were only 8 identified cases, giving an incidence of 6 per 1,000 as against 43 per 1,000 in the 5–15 years age group. This might mean that children of school age were more exposed to the risk of infection, but it does also tend to suggest that jaundice may not be a characteristic symptom of infective hepatitis in children under school age.

In an outbreak it is said that non-icteric (without jaundice) cases outnumber those with jaundice by 4:1, 6:1 or even 10:1. If this is so, then we can only conclude that the infection was widespread amongst the estate population.

It is not possible to say whether the incidence of the disease was higher on this housing estate than elsewhere in Luton. It is known that cases of jaundice were occurring in other parts of the town, but short of an intensive follow-up of all school absentees, the number of cases that occurred throughout Luton is conjectural. We do know, that while seven cases were notified on the Farley Hill Estate an additional 79 cases were subsequently discovered—a ratio of 1:11. During the period September 1954— August, 1955, 45 cases of jaundice were notified in Luton, and if one can assume that this number represents about 10 per cent of the cases that actually occurred, then we are faced with the possibility that there were some 450 cases of clinical jaundice in Luton during the twelve month period, an incidence of 4 per 1,000 population.

Summary

Outbreaks of infective hepatitis are sometimes associated with low standards of environmental hygiene, but there are undoubtedly other important factors. In this enquiry it has been shown that on a new housing estate where the standards of environment are good, a high incidence of infection became possible mainly because the age structure of the population provided an unusually high proportion of susceptible persons.

The age group most affected was 6–11 years and in consequence a wide dissemination of infection took place during school term. It is significant that of the nine adults who developed jaundice, six were school teachers.

The infection appears to have been widespread on the estate. The low incidence amongst adults might have been due in part to a lesser risk of exposure to infection, but can more probably be attributed to immunity derived from previous exposure. The relatively low incidence amongst children of pre-school age on the other hand suggests that jaundice may not be a characteristic symptom of infection in very young children.

In Luton notified cases of infective hepatitis represent only a fraction of the total, but between the years 1945 and 1955 the attack rate probably was low. High peaks of incidence become possible only when there is a sufficient proportion of non-immune persons in the population, and having regard to the age groups affected a decennial periodicity could be expected.

Attention has been drawn to the slow spread of the infection and it is, therefore, expected that the high incidence will be maintained in Luton during 1956.

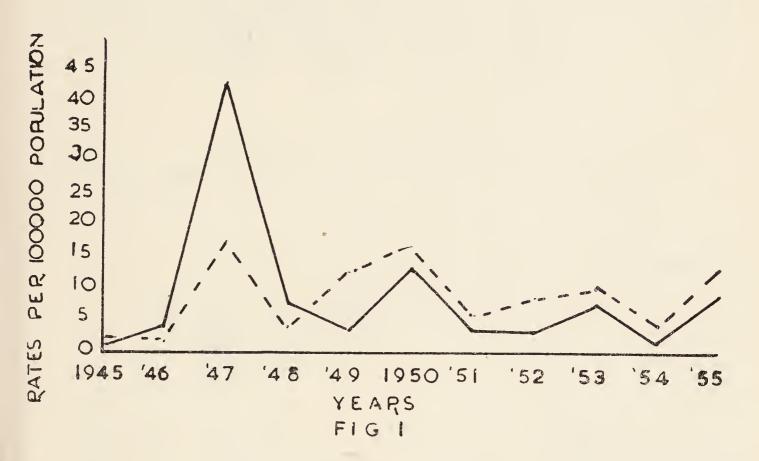
POLIOMYELITIS

The attack rate of poliomyelitis in Luton during the ten years period 1945–1955 is illustrated graphically in Fig. 1 and is compared with that for England and Wales. The graph shows that in the epidemic year 1947, the rate in Luton was more than twice the national figure. Since 1948 the Luton rate has been at a considerably lower level, though the trend has been similar to that of England and Wales, the higher rates of 1950, 1953 and 1955 coinciding with national peaks.

POLIOMYELITIS 1945-1955

RATES PER 100,000 POPULATION

LUTON —————
ENGLAND AND WALES —————



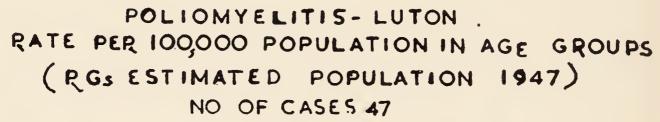
Although during the past eight years the incidence has been consistently below that of 1947 it could not yet be said that poliomyelitis in Luton has reverted to normal endemicity. The graph indicates, however, that there might be a trend in this direction.

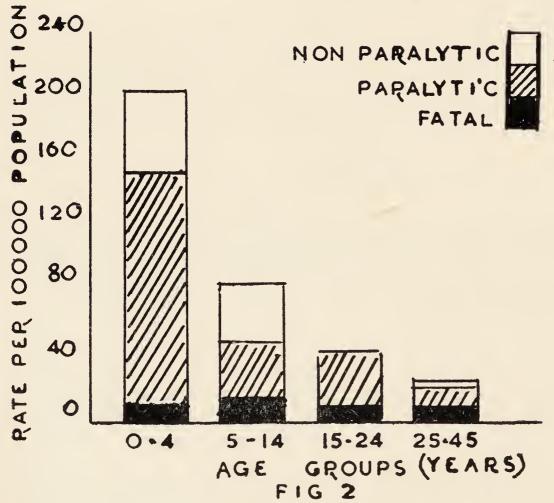
In the epidemic year, 1947, there was a scattered distribution of cases throughout the town. In the years that followed, this sporadic pattern was repeated and it was the exception rather than the rule to establish a history of previous contact in a case of the disease. Indeed, it is noteworthy that throughout the whole of the nine years multiple cases occurred in only four families.

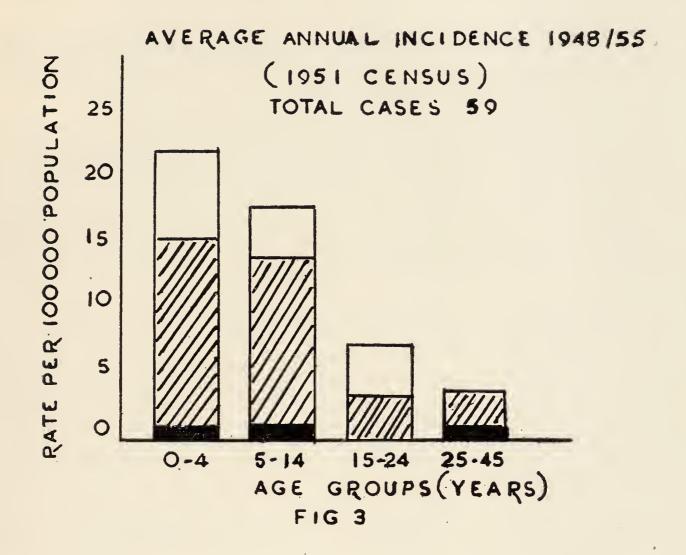
Poliomyelitis is caused by a group of viruses and it is not known whether the upsurge that occurred in 1947 was due to the introduction of a new virus or to the enhanced virulence of an already present virus. Were it the former, one would expect all age groups to have been attacked equally, but the histograms in Figs. 2 and 3, show that the concentration of attack in 1947 and the years that followed, was in the younger age groups and more particularly in the pre-school population. The pattern of incidence in the different age groups in the years 1948–1955 can be seen from Fig. 3 to have been closely similar to that of 1947, but at a much lower level.

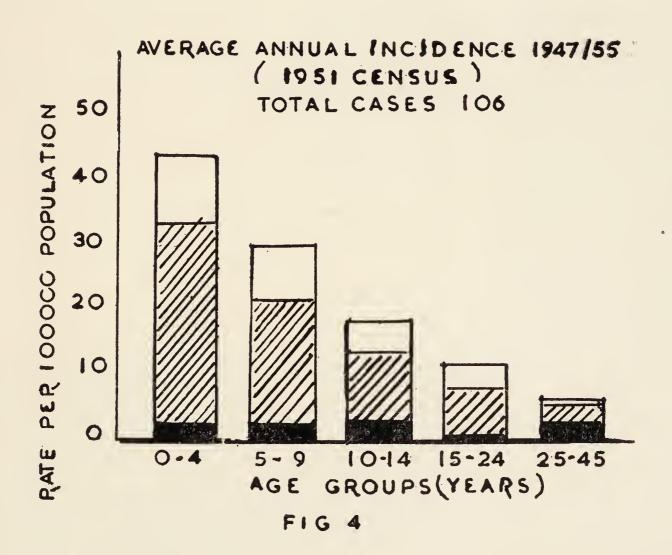
Since the only marked difference in the two histograms is one of total incidence, they have been combined in Fig. 4, and the 5–15 years age period has been sub-divided into two quinquennial periods. This histogram shows that the case incidence and incidence of paralysis diminish progressively from 5–45 years. The fatality rate does not show a similar trend but remains almost constant throughout the different age periods. The case fatality rate on the other hand shows a rising curve and attains its maximum in the 25–45 years age group.

The total number of cases in Luton during the nine year period 1947–1955 was only 106, but the graphs merit attention since the diagnosis was confirmed in all but a few of the cases by the same medical officer. The follow-









ing tentative conclusions are considered, therefore, to have some measure of justification.

First, the sudden rise in incidence in 1947 with a concentration of attack in the younger age groups is consistent with the enhanced virulence of a virus already omnipresent in the population.

Secondly, the sporadic distribution of cases each year, the failure in most cases to establish a history of contact with infection and the infrequency of multiple cases in households is indicative of widespread infection in a population containing a high proportion of immune persons.

Finally, the relatively low level of incidence in the years that followed 1947 indicates a movement towards normal endemicity and the pattern of age incidence in these years tends to confirm this.

CONFIRMED CASES OF POLIOMYELITIS 1947–1955

		Age Group (Years)						
Year	Туре	0-4	5-14	15-24	25-45			
† 1947	Paralytic Non-Paralytic	No. Popn. 15 9,725 5	No. Popn. 7 14,333 5	No. Popn. 5 12,318	No. Popn. 8 36,422 2			
* 1948–55	Paralytic Non-Paralytic	$ \begin{array}{c} 12 \\ 5 \end{array} \} 9,444 $	18 5 15,801	$\begin{pmatrix} 4 \\ 4 \end{pmatrix}$ 13,233	11 35,509			
* 1947–55	Paralytic Non-Paralytic Deaths		$ \begin{vmatrix} 25 \\ 10 \\ 4 \end{vmatrix} $	$\binom{9}{4}$ 13,233	$\binom{19}{2}$ 35,509			

[†] P.Gs. estimated population 1947. * Census population 1951.